## Missouri Long Term Care Facilities Directory

ABBEY SENIOR HEALTH				
206 NORTH MAIN ST		<b>Telephone</b> (636) 240-5754	Alzheimer's Unit N	ol
O'FALLON	MO 63366-2299	Level of Care: SNF		55
Mailing Address 206 NORTH MAIN ST		County SAINT CHARLES	DMH Licensed N	
O'FALLON	MO 63366-2299	Region 5 Medicare/Medicaid	Facility Number 2736	
		Transmit of the state of the st		
ABBEY SENIOR HEALTH				
206 NORTH MAIN ST		<b>Telephone</b> (636) 240-5754	Alzheimer's Unit NO	О
O'FALLON	MO 63366-	Level of Care: ALF**	Bed Capacity 1	0
Mailing Address 206 NORTH MAIN ST	Γ	County SAINT CHARLES	DMH Licensed N	lo
O'FALLON	MO 63366-2299	Region 5	Facility Number 2736	57
ABERDEEN HEIGHTS 505 COUCH AVE		Talanhana (214) 000 6000	Alzheimer's Unit Ye	20
KIRKWOOD	MO 62122 5526	Telephone (314) 909-6000 Level of Care: ICF		:s !6
	MO 63122-5536		Bed Capacity 1  DMH Licensed N	
Mailing Address 505 COUCH AVE KIRKWOOD	MO 63122-5536	•		
KIKKWOOD	WIO 03122-3330	Region 7	Facility Number 2757	U
ABERDEEN HEIGHTS				
505 COUCH AVE		<b>Telephone</b> (314) 909-6000	Alzheimer's Unit N	О
KIRKWOOD	MO 63122-5536	Level of Care: SNF	Bed Capacity 3	88
Mailing Address 505 COUCH AVE		County SAINT LOUIS COUNTY	DMH Licensed N	lo
KIRKWOOD	MO 63122-5536	Region 7 Medicare/Medicaid	Facility Number 2757	0'
ABERDEEN HEIGHTS				
505 COUCH AVE		<b>Telephone</b> (314) 909-6000	Alzheimer's Unit N	O
KIRKWOOD	MO 63122-5536	Level of Care: ALF**		36
Mailing Address 505 COUCH AVE		County SAINT LOUIS COUNTY	DMH Licensed N	
KIRKWOOD	MO 63122-5536	Region 7	Facility Number 2757	0
ABUNDANT ACRES CARE AND REI	HAR			
13277 STATE ROUTE D		<b>Telephone</b> (816) 324-5991	Alzheimer's Unit Ye	25
SAVANNAH	MO 64485-9431	Level of Care: SNF		38
Mailing Address 13277 STATE ROUTE		County ANDREW	DMH Licensed N	
SAVANNAH	MO 64485-9431	Region 4 Medicare/Medicaid	Facility Number 0714	
		Trade of the state		•
ACKERT PARK SKILLED NURSING	6 & REHABILITATION CENTER			
894 LELAND AVE		<b>Telephone</b> (314) 726-4767	Alzheimer's Unit N	О
UNIVERSITY CITY	MO 63130-3239	Level of Care: SNF	<b>Bed Capacity</b> 13	0
Mailing Address 894 LELAND AVE		County SAINT LOUIS COUNTY	<b>DMH Licensed</b> N	
UNIVERSITY CITY	MO 63130-3239	Region 7 Medicare/Medicaid	Facility Number 0210	10
ADAIR VILLAGE				
1801 N GAINES DR		<b>Telephone</b> (660) 885-8196	Alzheimer's Unit Ye	es
CLINTON	MO 64735-1127	Level of Care: SNF	Bed Capacity 12	
Mailing Address 1801 N GAINES DR		County HENRY	DMH Licensed N	
CLINTON	MO 64735-1127	Region 1 Medicare/Medicaid	Facility Number 0852	
		- G Instantial of Instantial of		-

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ADDINGTON PLACE OF LEE'S SU	<b>IMMIT</b>		
2160 SE BLUE PARKWAY		<b>Telephone</b> (816) 554-0101	Alzheimer's Unit Yes
LEE'S SUMMIT	MO 64063-1007	Level of Care: ALF**	<b>Bed Capacity</b> 88
Mailing Address 2160 SE BLUE PAR	KWAY	County JACKSON	DMH Licensed No
LEE'S SUMMIT	MO 64063-1007	Region 3	Facility Number 28136
			·
ADDINGTON PLACE OF SHOAL O	CREEK		
9601 NORTH TULLIS DR		<b>Telephone</b> (816) 407-9667	Alzheimer's Unit Yes
KANSAS CITY	MO 64157-7890	Level of Care: ALF**	Bed Capacity 88
Mailing Address 9601 NORTH TULL		County CLAY	DMH Licensed No
KANSAS CITY	MO 64157-7890	Region 4	Facility Number 28129
KANDAD CITT	WO 04137-7670	Region 7	Facility Number 20129
ADVANCE ASSISTED LIVING			
252 PAYTON PLACE		<b>Telephone</b> (573) 722-5200	Alzheimer's Unit No
ADVANCE	MO 63730-7251	Level of Care: ALF	Bed Capacity 44
Mailing Address PO BOX 790	WO 03730-7231	County STODDARD	DMH Licensed No
	MO (2720 0700	·	
ADVANCE	MO 63730-0790	Region 2	Facility Number 28426
ADVANCED CARE OF ST JOSEPH	ſ		
3002 N 18TH ST	•	<b>Telephone</b> (816) 364-4200	Alzheimer's Unit No
SAINT JOSEPH	MO 64505-1872	Level of Care: SNF	Bed Capacity 180
	WO 04303-1072		DMH Licensed No
Mailing Address 3002 N 18TH ST	MO 64505 1972	•	
SAINT JOSEPH	MO 64505-1872	Region 4 Medicare/Medicaid	Facility Number 08000
AEGIS HEALTH AND REHABILIT	ATION		
1441 CHARIC DR		<b>Telephone</b> (636) 394-2522	Alzheimer's Unit No
WILDWOOD	MO 63021-2001	Level of Care: SNF	Bed Capacity 66
Mailing Address 1441 CHARIC DR	1120 00021 2001	County SAINT LOUIS COUNTY	DMH Licensed No
WILDWOOD	MO 63021-2001	Region 7 Medicare/Medicaid	Facility Number 17887
WILDWOOD	WIO 03021-2001	Region / Wieurcare/Wieurcaru	racinty (valider 1700)
AKINS HEALTH CARE, INC			
4432 WEST BELLE PL		<b>Telephone</b> (314) 652-8908	Alzheimer's Unit No
SAINT LOUIS	MO 63108-2617	Level of Care: RCF	Bed Capacity 20
Mailing Address 4432 WEST BELLE	PL.	County SAINT LOUIS CITY	DMH Licensed Yes
SAINT LOUIS	MO 63108-2617	Region 7	Facility Number 00078
SIMAL BOOK	110 03100 2017	Region	ruemey rumber 00070
ALLEGRO			
1055 BELLEVUE AVENUE		<b>Telephone</b> (314) 332-8372	Alzheimer's Unit Yes
RICHMOND HEIGHTS	MO 63117-1827	Level of Care: ALF**	<b>Bed Capacity</b> 88
Mailing Address 1055 BELLEVUE A	VENUE	County SAINT LOUIS COUNTY	DMH Licensed No
RICHMOND HEIGHTS	MO 63117-1827	Region 7	Facility Number 31437
	· · · · · · · · · · · · · · · · · ·	· <del>0</del>	
ALPINE BREEZE HEALTH AND W	VELLNESS		
6124 RAYTOWN RD		<b>Telephone</b> (816) 358-8222	Alzheimer's Unit Yes
RAYTOWN	MO 64133-4007	Level of Care: SNF	Bed Capacity 154
Mailing Address 6124 RAYTOWN RI	D	<b>County</b> JACKSON	DMH Licensed No
RAYTOWN	MO 64133-4007	Region 3 Medicare/Medicaid	Facility Number 00768

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AMBERWOOD ESTATES NURSING	G AND REHABILITATION		
5303 BERMUDA DR		<b>Telephone</b> (314) 385-0910	Alzheimer's Unit NO
NORMANDY	MO 63121-1407	Level of Care: SNF	Bed Capacity 115
Mailing Address 5303 BERMUDA DR		County SAINT LOUIS COUNTY	DMH Licensed No
NORMANDY	MO 63121-1407	Region 7 Medicare/Medicaid	Facility Number 01238
ANEW HEALTHCARE BROOKFIE	LD		
215 EAST PRATT		<b>Telephone</b> (660) 675-0600	Alzheimer's Unit No
BROOKFIELD	MO 64628-1300	Level of Care: SNF	Bed Capacity 60
Mailing Address PO BOX 129		County LINN	DMH Licensed No
BROOKFIELD	MO 64628-0129	Region 5 Medicare/Medicaid	Facility Number 05220
ANEW HEALTHCARE ODESSA			
609 GOLF ST		<b>Telephone</b> (816) 230-7530	Alzheimer's Unit No
ODESSA	MO 64076-1462	Level of Care: SNF	<b>Bed Capacity</b> 60
Mailing Address 609 GOLF ST		County LAFAYETTE	DMH Licensed No
ODESSA	MO 64076-1462	Region 3 Medicare/Medicaid	Facility Number 05749
ANEW HEALTHCARE SARCOXIE			
1505 MINER		<b>Telephone</b> (417) 548-3434	Alzheimer's Unit No
SARCOXIE	MO 64862-9211	Level of Care: SNF	<b>Bed Capacity</b> 40
Mailing Address 1505 MINER		County JASPER	DMH Licensed No
SARCOXIE	MO 64862-0248	Region 1 Medicare/Medicaid	Facility Number 06864
ANEW SENIOR LIVING COLE CAN	MP		
517 NORTH OAK		<b>Telephone</b> (660) 668-3140	Alzheimer's Unit No
COLE CAMP	MO 65325-1264	Level of Care: RCF	Bed Capacity 30
Mailing Address PO BOX 252		County BENTON	DMH Licensed No
COLE CAMP	MO 65325-0252	Region 6	Facility Number 26313
ANNA DODSON HOME			
4616 HIGHWAY D		<b>Telephone</b> (573) 756-5530	Alzheimer's Unit No
FARMINGTON	MO 63640-7241	Level of Care: RCF*	Bed Capacity 20
Mailing Address 4616 HWY D		County SAINT FRANCOIS	DMH Licensed Yes
FARMINGTON	MO 63640-7241	Region 2	Facility Number 02160
ANNA DODSON HOME			
4616 HIGHWAY D		<b>Telephone</b> (573) 756-5530	Alzheimer's Unit No
FARMINGTON	MO 63640-7241	Level of Care: RCF	Bed Capacity 17
Mailing Address 4616 HWY D		County SAINT FRANCOIS	<b>DMH Licensed</b> Yes
FARMINGTON	MO 63640-7241	Region 2	Facility Number 02160
ANNA'S HOUSE ASSISTED LIVING	G FACILITY	M. I	A11 *** 1 ** **
25466 NORTH HWY 5	MO (552)	<b>Telephone</b> (417) 830-4420	Alzheimer's Unit No
LEBANON Mailing Address DO DOV 000	MO 65536-	Level of Care: ALF	Bed Capacity 80
Mailing Address PO BOX 969	MO (552( 00/0	County LACLEDE	DMH Licensed No
LEBANON	MO 65536-0969	Region 1	Facility Number 08791

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ANNIE'S HOUSE INC		<b>T. I.</b> (770) 200 1000		
25228 BUZZARD DRIVE	110 (27)	<b>Telephone</b> (573) 238-1300	Alzheimer's Unit	No
	MO 63764-9408	Level of Care: RCF	Bed Capacity	40
Mailing Address 25228 BUZZARD DRIV		County BOLLINGER	DMH Licensed	Yes
MARBLE HILL	MO 63764-9408	Region 2	Facility Number 3	80984
APPLE RIDGE CARE CENTER				
100 WEST THOMAS AVE		<b>Telephone</b> (660) 493-2232	Alzheimer's Unit	Yes
	MO 64096-9143	Level of Care: SNF	Bed Capacity	60
Mailing Address PO BOX 188	110 (100 (0100	County LAFAYETTE	DMH Licensed	No
WAVERLY	MO 64096-0188	Region 3 Medicare/Medicaid	Facility Number 0	08823
APPLETON CITY MANOR				
600 NORTH OHIO ST		<b>Telephone</b> (660) 476-2128	Alzheimer's Unit	No
	MO 64724-1609	Level of Care: SNF	Bed Capacity	60
Mailing Address PO BOX 98	.10 04724 1007	County SAINT CLAIR	DMH Licensed	No
9	MO 64724-0098	Region 1 Medicare/Medicaid		110
ATTENONCHT	VIO 04724-0076	Region 1 Medicale/Medicald	racinty Number	11037
ARBOR HILLS NURSING AND REHA	BILITATION CENTER			
800 CHAMBERS RD		<b>Telephone</b> (314) 524-1111	Alzheimer's Unit	No
	MO 63135-2133	Level of Care: SNF	Bed Capacity	150
Mailing Address 800 CHAMBERS RD		County SAINT LOUIS COUNTY	DMH Licensed	No
	MO 63135-2133	Region 7 Medicare/Medicaid		1435
		region Wiedicard/Medicard		71 133
ARBOR VIEW NURSING AND REHAE	BILITATION			
ARBOR VIEW NURSING AND REHAE	BILITATION	<b>Telephone</b> (636) 274-1777	Alzheimer's Unit	NO
6400 THE CEDARS COURT	BILITATION  MO 63016-2220	<b>Telephone</b> (636) 274-1777 <b>Level of Care:</b> SNF	Alzheimer's Unit Bed Capacity	NO 150
6400 THE CEDARS COURT	MO 63016-2220	• '		
6400 THE CEDARS COURT CEDAR HILL Mailing Address 6400 THE CEDARS CT	MO 63016-2220	Level of Care: SNF	Bed Capacity DMH Licensed	150
6400 THE CEDARS COURT CEDAR HILL Mailing Address 6400 THE CEDARS CT	MO 63016-2220	Level of Care: SNF County JEFFERSON	Bed Capacity DMH Licensed	150 No
6400 THE CEDARS COURT CEDAR HILL Mailing Address 6400 THE CEDARS CT CEDAR HILL ARBORS AT DUNSFORD COURT- ME	MO 63016-2220 MO 63016-2220	Level of Care: SNF County JEFFERSON Region 2 Medicare/Medicaid Y AMERICARE	Bed Capacity DMH Licensed Facility Number	150 No 2647
6400 THE CEDARS COURT CEDAR HILL Mailing Address 6400 THE CEDARS CT CEDAR HILL ARBORS AT DUNSFORD COURT- ME 775 DUNSFORD ROAD	MO 63016-2220 MO 63016-2220 EMORY CARE ASSISTED LIVING B	Level of Care: SNF County JEFFERSON Region 2 Medicare/Medicaid  Y AMERICARE Telephone (573) 468-2600	Bed Capacity DMH Licensed Facility Number 1	150 No 2647 Yes
6400 THE CEDARS COURT CEDAR HILL Mailing Address 6400 THE CEDARS CT CEDAR HILL ARBORS AT DUNSFORD COURT- ME 775 DUNSFORD ROAD SULLIVAN	MO 63016-2220 MO 63016-2220	Level of Care: SNF County JEFFERSON Region 2 Medicare/Medicaid  Y AMERICARE Telephone (573) 468-2600 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	150 No 2647 Yes 50
6400 THE CEDARS COURT CEDAR HILL Mailing Address 6400 THE CEDARS CT CEDAR HILL ARBORS AT DUNSFORD COURT- ME 775 DUNSFORD ROAD	MO 63016-2220 MO 63016-2220 EMORY CARE ASSISTED LIVING B	Level of Care: SNF County JEFFERSON Region 2 Medicare/Medicaid  Y AMERICARE Telephone (573) 468-2600	Bed Capacity DMH Licensed Facility Number 1	150 No 2647 Yes
6400 THE CEDARS COURT CEDAR HILL  Mailing Address 6400 THE CEDARS CT CEDAR HILL  ARBORS AT DUNSFORD COURT- ME 775 DUNSFORD ROAD SULLIVAN  Mailing Address 775 DUNSFORD RD	MO 63016-2220 MO 63016-2220 EMORY CARE ASSISTED LIVING B	Level of Care: SNF County JEFFERSON Region 2 Medicare/Medicaid  Y AMERICARE Telephone (573) 468-2600 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number	150 No 2647 Yes 50
6400 THE CEDARS COURT CEDAR HILL Mailing Address 6400 THE CEDARS CT CEDAR HILL ARBORS AT DUNSFORD COURT- ME 775 DUNSFORD ROAD SULLIVAN Mailing Address 775 DUNSFORD RD SULLIVAN	MO 63016-2220 MO 63016-2220 EMORY CARE ASSISTED LIVING B MO 63080-1270 MO 63080-1270	Level of Care: SNF County JEFFERSON Region 2 Medicare/Medicaid  Y AMERICARE Telephone (573) 468-2600 Level of Care: ALF** County FRANKLIN Region 6	Bed Capacity DMH Licensed Facility Number	150 No 2647 Yes 50 No
6400 THE CEDARS COURT CEDAR HILL Mailing Address 6400 THE CEDARS CT CEDAR HILL ARBORS AT DUNSFORD COURT- ME 775 DUNSFORD ROAD SULLIVAN Mailing Address 775 DUNSFORD RD SULLIVAN ARBORS AT GLENDALE GARDENS	MO 63016-2220 MO 63016-2220 EMORY CARE ASSISTED LIVING B MO 63080-1270 MO 63080-1270	Level of Care: SNF County JEFFERSON Region 2 Medicare/Medicaid  Y AMERICARE Telephone (573) 468-2600 Level of Care: ALF** County FRANKLIN Region 6  THE	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	150 No 2647 Yes 50 No 6094
6400 THE CEDARS COURT CEDAR HILL Mailing Address 6400 THE CEDARS CT CEDAR HILL ARBORS AT DUNSFORD COURT- ME 775 DUNSFORD ROAD SULLIVAN Mailing Address 775 DUNSFORD RD SULLIVAN ARBORS AT GLENDALE GARDENS - 1300 SOUTH MAIN	MO 63016-2220  MO 63016-2220  EMORY CARE ASSISTED LIVING B  MO 63080-1270  MO 63080-1270  MEMORY CARE BY AMERICARE,	Level of Care: SNF County JEFFERSON Region 2 Medicare/Medicaid  Y AMERICARE Telephone (573) 468-2600 Level of Care: ALF** County FRANKLIN Region 6  THE Telephone (660) 885-2272	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	150 No 2647 Yes 50 No 6094
6400 THE CEDARS COURT CEDAR HILL  Mailing Address 6400 THE CEDARS CT CEDAR HILL  ARBORS AT DUNSFORD COURT- ME 775 DUNSFORD ROAD SULLIVAN  Mailing Address 775 DUNSFORD RD SULLIVAN  ARBORS AT GLENDALE GARDENS- 1300 SOUTH MAIN CLINTON	MO 63016-2220 MO 63016-2220 EMORY CARE ASSISTED LIVING B MO 63080-1270 MO 63080-1270	Level of Care: SNF County JEFFERSON Region 2 Medicare/Medicaid  Y AMERICARE Telephone (573) 468-2600 Level of Care: ALF** County FRANKLIN Region 6  THE Telephone (660) 885-2272 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	150 No 2647 Yes 50 No 6094
6400 THE CEDARS COURT CEDAR HILL  Mailing Address 6400 THE CEDARS CT CEDAR HILL  ARBORS AT DUNSFORD COURT- ME 775 DUNSFORD ROAD SULLIVAN  Mailing Address 775 DUNSFORD RD SULLIVAN  ARBORS AT GLENDALE GARDENS 1300 SOUTH MAIN CLINTON  Mailing Address 1300 S MAIN	MO 63016-2220  MO 63016-2220  EMORY CARE ASSISTED LIVING B  MO 63080-1270  MO 63080-1270  MEMORY CARE BY AMERICARE,  MO 64735-2728	Level of Care: SNF County JEFFERSON Region 2 Medicare/Medicaid  Y AMERICARE Telephone (573) 468-2600 Level of Care: ALF** County FRANKLIN Region 6  THE Telephone (660) 885-2272 Level of Care: ALF** County HENRY	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	150 No 2647 Yes 50 No 6094 Yes 42 No
6400 THE CEDARS COURT CEDAR HILL  Mailing Address 6400 THE CEDARS CT CEDAR HILL  ARBORS AT DUNSFORD COURT- ME 775 DUNSFORD ROAD SULLIVAN  Mailing Address 775 DUNSFORD RD SULLIVAN  ARBORS AT GLENDALE GARDENS 1300 SOUTH MAIN CLINTON  Mailing Address 1300 S MAIN	MO 63016-2220  MO 63016-2220  EMORY CARE ASSISTED LIVING B  MO 63080-1270  MO 63080-1270  MEMORY CARE BY AMERICARE,	Level of Care: SNF County JEFFERSON Region 2 Medicare/Medicaid  Y AMERICARE Telephone (573) 468-2600 Level of Care: ALF** County FRANKLIN Region 6  THE Telephone (660) 885-2272 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	150 No 2647 Yes 50 No 6094
6400 THE CEDARS COURT CEDAR HILL  Mailing Address 6400 THE CEDARS CT CEDAR HILL  ARBORS AT DUNSFORD COURT- ME 775 DUNSFORD ROAD SULLIVAN  Mailing Address 775 DUNSFORD RD SULLIVAN  ARBORS AT GLENDALE GARDENS 1300 SOUTH MAIN CLINTON  Mailing Address 1300 S MAIN CLINTON	MO 63016-2220  MO 63016-2220  EMORY CARE ASSISTED LIVING B  MO 63080-1270  MO 63080-1270  MEMORY CARE BY AMERICARE,  MO 64735-2728  MO 64735-2728	Level of Care: SNF County JEFFERSON Region 2 Medicare/Medicaid  Y AMERICARE Telephone (573) 468-2600 Level of Care: ALF** County FRANKLIN Region 6  THE Telephone (660) 885-2272 Level of Care: ALF** County HENRY Region 1	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	150 No 2647 Yes 50 No 6094 Yes 42 No
6400 THE CEDARS COURT CEDAR HILL  Mailing Address 6400 THE CEDARS CT CEDAR HILL  ARBORS AT DUNSFORD COURT- ME 775 DUNSFORD ROAD SULLIVAN  Mailing Address 775 DUNSFORD RD SULLIVAN  ARBORS AT GLENDALE GARDENS 1300 SOUTH MAIN CLINTON  Mailing Address 1300 S MAIN	MO 63016-2220  MO 63016-2220  EMORY CARE ASSISTED LIVING B  MO 63080-1270  MO 63080-1270  MEMORY CARE BY AMERICARE,  MO 64735-2728  MO 64735-2728	Level of Care: SNF County JEFFERSON Region 2 Medicare/Medicaid  Y AMERICARE Telephone (573) 468-2600 Level of Care: ALF** County FRANKLIN Region 6  THE Telephone (660) 885-2272 Level of Care: ALF** County HENRY Region 1	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	150 No 2647 Yes 50 No 6094 Yes 42 No
6400 THE CEDARS COURT CEDAR HILL  Mailing Address 6400 THE CEDARS CT CEDAR HILL  ARBORS AT DUNSFORD COURT- ME 775 DUNSFORD ROAD SULLIVAN  Mailing Address 775 DUNSFORD RD SULLIVAN  ARBORS AT GLENDALE GARDENS- 1300 SOUTH MAIN CLINTON  Mailing Address 1300 S MAIN CLINTON  ARBORS AT HARMONY GARDENS- 539 EAST YOUNG AVENUE	MO 63016-2220  MO 63016-2220  EMORY CARE ASSISTED LIVING B  MO 63080-1270  MO 63080-1270  MEMORY CARE BY AMERICARE,  MO 64735-2728  MO 64735-2728	Level of Care: SNF County JEFFERSON Region 2 Medicare/Medicaid  Y AMERICARE Telephone (573) 468-2600 Level of Care: ALF** County FRANKLIN Region 6  THE Telephone (660) 885-2272 Level of Care: ALF** County HENRY Region 1	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	150 No 2647 Yes 50 No 6094 Yes 42 No 7054
6400 THE CEDARS COURT CEDAR HILL  Mailing Address 6400 THE CEDARS CT CEDAR HILL  ARBORS AT DUNSFORD COURT- ME 775 DUNSFORD ROAD SULLIVAN  Mailing Address 775 DUNSFORD RD SULLIVAN  ARBORS AT GLENDALE GARDENS- 1300 SOUTH MAIN CLINTON  Mailing Address 1300 S MAIN CLINTON  ARBORS AT HARMONY GARDENS- 539 EAST YOUNG AVENUE	MO 63016-2220  MO 63016-2220  EMORY CARE ASSISTED LIVING B  MO 63080-1270  MEMORY CARE BY AMERICARE,  MO 64735-2728  MEMORY CARE ASSISTED LIVING  MEMORY CARE ASSISTED LIVING	Level of Care: SNF County JEFFERSON Region 2 Medicare/Medicaid  Y AMERICARE Telephone (573) 468-2600 Level of Care: ALF** County FRANKLIN Region 6  THE Telephone (660) 885-2272 Level of Care: ALF** County HENRY Region 1  BY AMERICARE THE Telephone (660) 429-0034	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	150 No 2647 Yes 50 No 6094 Yes 42 No 7054
6400 THE CEDARS COURT CEDAR HILL  Mailing Address 6400 THE CEDARS CT CEDAR HILL  ARBORS AT DUNSFORD COURT- ME 775 DUNSFORD ROAD SULLIVAN  Mailing Address 775 DUNSFORD RD SULLIVAN  ARBORS AT GLENDALE GARDENS- 1300 SOUTH MAIN CLINTON  Mailing Address 1300 S MAIN CLINTON  ARBORS AT HARMONY GARDENS- 539 EAST YOUNG AVENUE WARRENSBURG  Mailing Address 539 EAST YOUNG AVENUE	MO 63016-2220  MO 63016-2220  EMORY CARE ASSISTED LIVING B  MO 63080-1270  MEMORY CARE BY AMERICARE,  MO 64735-2728  MEMORY CARE ASSISTED LIVING  MEMORY CARE ASSISTED LIVING	Level of Care: SNF County JEFFERSON Region 2 Medicare/Medicaid  Y AMERICARE Telephone (573) 468-2600 Level of Care: ALF** County FRANKLIN Region 6  THE Telephone (660) 885-2272 Level of Care: ALF** County HENRY Region 1  BY AMERICARE THE Telephone (660) 429-0034 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	150 No 2647 Yes 50 No 6094 Yes 42 No 7054

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ARBORS AT HIGHLAND CREST - ALZHEIMERS				17
620 GILASPY ROAD	Telephone	(660) 627-8004	Alzheimer's Unit	Yes
KIRKSVILLE MO 63501-40		ALF**	Bed Capacity	28 N-
Mailing Address 620 GILASPY RD KIRKSVILLE MO 63501-40	· · · <b>·</b>	AIR	DMH Licensed	No
KIRKSVILLE MO 63501-40	7578 <b>Region</b> 5		Facility Number	23608
ARBORS AT LAKEVIEW BEND - ASSISTED LIVI	NG BY AMERICARE, THE			
1700 ASBURY CIRCLE WEST	Telephone	(573) 581-8777	Alzheimer's Unit	Yes
MEXICO MO 65265-14	Level of Care:	ALF**	Bed Capacity	39
Mailing Address 1722 HUNTINGFIELD DR	County AU	DRAIN	DMH Licensed	No
MEXICO MO 65265-38	Region 5		Facility Number	13544
ADDODE AT MOUNT CADMEL THE				
ARBORS AT MOUNT CARMEL, THE 723 FIRST CAPITOL DR	Telephone	(626) 046 4140	Alzheimer's Unit	No
SAINT CHARLES MO 63301-2'	•	(636) 946-4140 ALF**	Bed Capacity	30
Mailing Address 723 FIRST CAPITOL DR		INT CHARLES	DMH Licensed	No
SAINT CHARLES MO 63301-2'	·	INT CHARLES	Facility Number	29396
SAINT CHARLES MO 03301-2	Kegion 5		racinty Number	29390
ARBORS AT PARKSIDE - MEMORY CARE ASSIS	ΓED LIVING BY AMERICARE			
1700 EAST 10TH ST	Telephone	(573) 364-2602	Alzheimer's Unit	Yes
ROLLA MO 65401-46	Level of Care:	ALF**	<b>Bed Capacity</b>	22
Mailing Address 1700 EAST 10TH ST	County PH	ELPS	DMH Licensed	No
ROLLA MO 65401-46	<b>Region</b> 6		Facility Number	13589
ARBORS AT VICTORIAN PLACE OF CUBA, MEM	IORY CARE ASSISTED LIVING BY AM	IERICARE, THE		
903 HWY DD	Telephone	(573) 885-0551	Alzheimer's Unit	Yes
CUBA MO 65453-80	•	ALF**	Bed Capacity	32
Mailing Address 903 HWY DD	County CR	AWFORD	DMH Licensed	No
CUBA MO 65453-80	<b>Region</b> 6		Facility Number	27071
ARBORS AT VICTORIAN PLACE OF WASHINGT	ON MEMODY CADE ASSISTED LIVIN	IC DV AMEDICADE	PHE	
2701 RABBIT TRAIL DR	Telephone	(636) 390-9500	Alzheimer's Unit	Yes
WASHINGTON MO 63090-6'	•	ALF**	Bed Capacity	32
Mailing Address 2701 RABBIT TRAIL DR		ANKLIN	DMH Licensed	No
WASHINGTON MO 63090-6	•	THE THE	Facility Number	28065
ARBORS AT WESTBROOK TERRACE-ALZHEIM				
3409 NORTH 10 MILE DR	Telephone	(573) 556-5648	Alzheimer's Unit	Yes
JEFFERSON CITY MO 65109-03		ALF**	Bed Capacity	26
Mailing Address 3409 NORTH 10 MILE DR	County CC	LE	DMH Licensed	No
JEFFERSON CITY MO 65109-05	<b>Region</b> 6		Facility Number	27914
ARBORS AT WESTRIDGE PLACE - MEMORY CA	RE BY AMERICARE, THE			
539 NORTH WEST ST	Telephone	(573) 471-6484	Alzheimer's Unit	Yes
SIKESTON MO 63801-54	Level of Care:	ALF**	<b>Bed Capacity</b>	28
Mailing Address 539 NORTH WEST ST	County SC	OTT	DMH Licensed	No
SIKESTON MO 63801-54	143 <b>Region</b> 2		<b>Facility Number</b>	12693

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ARIZONA CARE CENTER				
101 ARIZONA ST		<b>Telephone</b> (573) 237-4830	Alzheimer's Unit	No
NEW HAVEN	MO 63068-1210	Level of Care: ALF	Bed Capacity	15
Mailing Address 101 ARIZONA ST		County FRANKLIN	DMH Licensed	Yes
NEW HAVEN	MO 63068-1210	Region 6	Facility Number	19080
A DIMONID O A WO GENHOD A WINNO				
ARMOUR OAKS SENIOR LIVING ( 8100 WORNALL RD	COMMUNITY	T-1 (916) 262 5141	A 1-1	No
	MO (4114 590)	<b>Telephone</b> (816) 363-5141	Alzheimer's Unit	No
KANSAS CITY	MO 64114-5806	Level of Care: ALF	Bed Capacity	47 N-
Mailing Address 8100 WORNALL RD		County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64114-5806	Region 3	Facility Number	00199
ARMOUR OAKS SENIOR LIVING (	COMMUNITY			
8100 WORNALL RD		<b>Telephone</b> (816) 363-5141	Alzheimer's Unit	No
KANSAS CITY	MO 64114-5806	Level of Care: SNF	Bed Capacity	38
Mailing Address 8100 WORNALL RD		County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64114-5806	Region 3 Medicare/Medicaid	Facility Number	00199
ARROWHEAD SENIOR LIVING CO	OMMUNITY			
6100 ARROWHEAD DRIVE	3.00 (50.05 005)	<b>Telephone</b> (573) 302-7111	Alzheimer's Unit	No
OSAGE BEACH	MO 65065-2754	Level of Care: SNF	Bed Capacity	80
Mailing Address 6100 ARROWHEAD		County CAMDEN	DMH Licensed	No
OSAGE BEACH	MO 65065-2754	Region 6 Medicare/Medicaid	Facility Number	31536
ARROWHEAD SENIOR LIVING CO	OMMUNITY			
6100 ARROWHEAD DRIVE		<b>Telephone</b> (573) 302-7111	Alzheimer's Unit	Yes
OSAGE BEACH	MO 65065-2754	Level of Care: ALF**	Bed Capacity	90
Mailing Address 6100 ARROWHEAD	DRIVE	County CAMDEN	DMH Licensed	No
OSAGE BEACH	MO 65065-2754	Region 6	Facility Number	31536
AGM CROVE WEAT TWO ARE FACE	T YOU			
ASH GROVE HEALTHCARE FACIL	LIIY	T-1	A 1-1:!- T.I:4	V
401 NORTH MEDICAL DR	MO 65604 1004	<b>Telephone</b> (417) 751-2575	Alzheimer's Unit	Yes
ASH GROVE	MO 65604-1004	Level of Care: SNF	Bed Capacity	82 No.
Mailing Address PO BOX 247	MO 65604 0247	County GREENE	DMH Licensed	No
ASH GROVE	MO 65604-0247	Region 1 Medicare/Medicaid	Facility Number	00200
ASHBROOK - ASSISTED LIVING B	Y AMERICARE			
500 ASHBROOK DR		<b>Telephone</b> (573) 756-5544	Alzheimer's Unit	No
FARMINGTON	MO 63640-9235	Level of Care: ALF**	<b>Bed Capacity</b>	72
Mailing Address 500 ASHBROOK DR		County SAINT FRANCOIS	DMH Licensed	No
FARMINGTON	MO 63640-9235	Region 2	Facility Number	18138
ASHBURY HEIGHTS OF CHILLICO	ЭТНЕ			
603 ST LOUIS ST	<del></del>	<b>Telephone</b> (660) 707-1270	Alzheimer's Unit	No
CHILLICOTHE	MO 64601-2438	Level of Care: RCF	Bed Capacity	12
Mailing Address 603 ST LOUIS ST		County LIVINGSTON	DMH Licensed	Yes

**Facility Number** 

23909

MO 64601-2438

CHILLICOTHE

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ACHDIDY HEIGHTS OF EAVETTE			
ASHBURY HEIGHTS OF FAYETTE 200 GROCE ST	•	<b>Telephone</b> (660) 248-3603	Alzheimer's Unit No
FAYETTE	MO 65248-9813	Level of Care: RCF	Bed Capacity 12
Mailing Address 200 GROCE ST	0.210 9010	County HOWARD	DMH Licensed No
FAYETTE	MO 65248-9813	Region 5	Facility Number 23894
			·
ASHBURY HEIGHTS OF FULTON			
704 WEST CHESTNUT		<b>Telephone</b> (573) 642-2015	Alzheimer's Unit No
FULTON	MO 65251-1254	Level of Care: RCF	Bed Capacity 12
Mailing Address 704 WEST CHESTNU	UT	County CALLAWAY	DMH Licensed No
FULTON	MO 65251-1254	Region 6	Facility Number 23923
ASHBURY HEIGHTS OF JEFFERSO	ON CITY		
834 WEATHERED ROCK COURT		<b>Telephone</b> (573) 634-7402	Alzheimer's Unit No
JEFFERSON CITY	MO 65101-1824	Level of Care: RCF	Bed Capacity 12
Mailing Address 834 WEATHERED R		County COLE	DMH Licensed No
JEFFERSON CITY	MO 65101-1824	Region 6	Facility Number 23936
ASHBURY HEIGHTS OF LAURIE			
299 HIGHWAY RA		<b>Telephone</b> (573) 374-0076	Alzheimer's Unit No
LAURIE	MO 65038-6024	Level of Care: RCF	Bed Capacity 12
Mailing Address 299 HIGHWAY RA		County MORGAN	DMH Licensed No
LAURIE	MO 65038-6024	Region 6	Facility Number 23915
A CHIDLIDY HEICHTE OF MONTECO	MEDV CVEV		
ASHBURY HEIGHTS OF MONTGO 625 WEST 2ND ST	WIERT CITT	<b>Telephone</b> (573) 564-3386	Alzheimer's Unit No
MONTGOMERY CITY	MO 63361-1762	Level of Care: RCF	Bed Capacity 12
Mailing Address 625 WEST 2ND ST	WIO 03301-1702	County MONTGOMERY	DMH Licensed No
MONTGOMERY CITY	MO 63361-1762	Region 6	Facility Number 20160
ASHBURY HEIGHTS OF TIPTON 908 SOUTH PARK		T-11 (CC) 422 CA0C	Al-lada II.
TIPTON	MO 65081-8408	Telephone (660) 433-6496 Level of Care: RCF	Alzheimer's Unit No Bed Capacity 12
Mailing Address 908 SOUTH PARK	MO 03081-8408	County MONITEAU	Bed Capacity 12 DMH Licensed No
TIPTON	MO 65081-8408	Region 6	Facility Number 16506
TH TON	WO 03001 0400	Acgion 0	racincy (vaniser 10500
ASHLAND VILLA - ASSISTED LIVI	NG BY AMERICARE		
301 SOUTH HENRY CLAY BLVD		<b>Telephone</b> (573) 657-1920	Alzheimer's Unit No
ASHLAND	MO 65010-9439	Level of Care: ALF**	<b>Bed Capacity</b> 72
Mailing Address 301 SOUTH HENRY	CLAY BLVD	County BOONE	<b>DMH Licensed</b> No
ASHLAND	MO 65010-9439	Region 6	Facility Number 20303
ASHLEY MANOR HEALTH & REH	ABILITATION		
1630 RADIO HILL ROAD	,	<b>Telephone</b> (660) 882-6584	Alzheimer's Unit No
BOONVILLE	MO 65233-1957	Level of Care: SNF	Bed Capacity 52
Mailing Address 1630 RADIO HILL R		County COOPER	DMH Licensed No
BOONVILLE	MO 65233-1957	Region 6 Medicare/Medicaid	Facility Number 00216
		-	

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ASHTON ON THE PLAZA, THE				
2 EMANUEL CLEAVER II BLVD		<b>Telephone</b> (816) 505-3030	Alzheimer's Unit	Yes
KANSAS CITY	MO 64112-1712	Level of Care: ALF**	Bed Capacity	96
Mailing Address 2 EMANUEL CLEAVE	R II BLVD	<b>County</b> JACKSON	DMH Licensed	No
KANSAS CITY	MO 64112-1712	Region 3	Facility Number	31791
ASPEN POINT HEALTH AND REHAB	BILITATION			
2840 WEST CLAY ST		<b>Telephone</b> (636) 946-6100	Alzheimer's Unit	No
SAINT CHARLES	MO 63301-2536	Level of Care: SNF	Bed Capacity	180
Mailing Address 2840 WEST CLAY ST		County SAINT CHARLES	DMH Licensed	No
SAINT CHARLES	MO 63301-2536	Region 5 Medicare/Medicaid	Facility Number	01521
A CDEN WALLEY				
ASPEN VALLEY 1888 EAST 9TH STREET		<b>Telephone</b> (696) 346-9634	Alzheimer's Unit	Yes
	MO 63090-3549	Level of Care: ALF**	Bed Capacity	14
Mailing Address 1888 EAST 9TH STREE		County FRANKLIN	DMH Licensed	No
_	MO 63090-3549	Region 6	Facility Number	32779
WASHINGTON	WIO 03090-3349	Region 0	racinty Number	32119
ASPEN VALLEY FOX CREST				
2694 FOX CREST DRIVE		<b>Telephone</b> (636) 346-9634	Alzheimer's Unit	NO
	MO 63090-5694	Level of Care: ALF**	Bed Capacity	12
Mailing Address 2694 FOX CREST DRIV		County FRANKLIN	DMH Licensed	No
WASHINGTON	MO 63090-5694	Region 6	Facility Number	33537
ASPIRE SENIOR LIVING ADVANCE				
315 SOUTH TILLEY ST		<b>Telephone</b> (573) 649-3551	Alzheimer's Unit	No
ADVANCE	MO 63730-7230	Level of Care: SNF	Bed Capacity	70
Mailing Address 315 S TILLEY ST		County STODDARD	DMH Licensed	No
ADVANCE	MO 63730-7230	Region 2 Medicare/Medicaid	Facility Number	11722
ASPIRE SENIOR LIVING EAST PRAI	RIE			
186 MILLAR RD		<b>Telephone</b> (573) 649-3551	Alzheimer's Unit	No
EAST PRAIRIE	MO 63845-1180	Level of Care: SNF	Bed Capacity	70
Mailing Address PO BOX 299		County MISSISSIPPI	DMH Licensed	No
EAST PRAIRIE	MO 63845-0299	Region 2 Medicare/Medicaid	Facility Number	12083
A CDIDE CENIOD I IVING EVCEI CIOI	D CDDINGC			
ASPIRE SENIOR LIVING EXCELSION 1003 MEADOWLARK LN	K SPRINGS	<b>Telephone</b> (816) 630-3145	Alzheimer's Unit	No
	MO 64024-3304	Telephone (816) 630-3145 Level of Care: SNF	Bed Capacity	108
			DMH Licensed	
Mailing Address 1003 MEADOWLARK		•		No
EXCELSIOR SPRINGS	MO 64024-3304	Region 4 Medicare/Medicaid	Facility Number	19197
ASPIRE SENIOR LIVING JONESBUR	G	<b></b>		
308 CEDAR AVE		<b>Telephone</b> (636) 488-5400	Alzheimer's Unit	Yes
	MO 63351-1126	Level of Care: SNF	Bed Capacity	90
Mailing Address PO BOX 218	NO 62251 0210	County MONTGOMERY	DMH Licensed	No
JONESBURG	MO 63351-0218	Region 6 Medicare/Medicaid	Facility Number	13265

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ACRIDE CENTOR I WING MAI DEN	NT.		
ASPIRE SENIOR LIVING MALDEN 1209 STOKELAN		<b>Telephone</b> (573) 276-5115	Alzheimer's Unit Yes
MALDEN	MO 63863-1335	Level of Care: SNF	Bed Capacity 70
Mailing Address 1209 STOKELAN	1410 03003-1333	County DUNKLIN	DMH Licensed No
MALDEN	MO 63863-1335	Region 2 Medicare/Medicaid	Facility Number 12465
MADDLIV	1410 03003 1333	Region 2 Medicare/Medicard	racincy runner 12403
ASPIRE SENIOR LIVING MOBERI	LY		
700 EAST URBANDALE DR		<b>Telephone</b> (660) 263-9060	Alzheimer's Unit Yes
MOBERLY	MO 65270-1966	Level of Care: SNF	Bed Capacity 120
Mailing Address 700 EAST URBAND	DALE DR	County RANDOLPH	DMH Licensed No
MOBERLY	MO 65270-1966	Region 5 Medicare/Medicaid	Facility Number 12523
ASPIRE SENIOR LIVING OAK GR	OVE	<b>T. 1</b> (210, 400, 444)	
2108 SW MITCHELL STREET	3.50 (4.05.5 0.450	<b>Telephone</b> (816) 690-4118	Alzheimer's Unit Yes
OAK GROVE	MO 64075-9472	Level of Care: SNF	Bed Capacity 90
Mailing Address 2108 S MITCHELL	150 (1077 0170	County JACKSON	DMH Licensed No
OAK GROVE	MO 64075-9472	Region 3 Medicare/Medicaid	Facility Number 05849
ASPIRE SENIOR LIVING PLATTE	CITY		
220 O'ROURKE DRIVE		<b>Telephone</b> (816) 858-5222	Alzheimer's Unit No
PLATTE CITY	MO 64079-9360	Level of Care: SNF	Bed Capacity 120
Mailing Address PO BOX 1310		County PLATTE	DMH Licensed No
PLATTE CITY	MO 64079-1310	Region 4 Medicare/Medicaid	Facility Number 12655
			•
ASPIRE SENIOR LIVING POPLAR	BLUFF		
3001 MAY ST		<b>Telephone</b> (573) 686-6999	Alzheimer's Unit No
POPLAR BLUFF	MO 63901-1942	Level of Care: SNF	Bed Capacity 120
Mailing Address 3001 MAY ST		County BUTLER	<b>DMH Licensed</b> No
POPLAR BLUFF	MO 63901-1942	Region 2 Medicare/Medicaid	Facility Number 16013
ASSISTED LIVING AT CHARLESS	SVILLAGE		
5943 TELEGRAPH RD		<b>Telephone</b> (314) 846-2002	Alzheimer's Unit No
SAINT LOUIS	MO 63129-4715	Level of Care: ALF**	Bed Capacity 18
Mailing Address 5943 TELEGRAPH I	RD	County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS	MO 63129-4715	Region 7	Facility Number 05586
A COLOMBED I WINNO A TO THE STATE OF	AONII ANDS		
ASSISTED LIVING AT THE MEAD	DOWLANDS	m 1 1 (626) 070 2600	
135 MEADOWLANDS ESTATES LN	MO (2266 4501	<b>Telephone</b> (636) 978-3600	Alzheimer's Unit Yes
O'FALLON	MO 63366-4591	Level of Care: ALF**	Bed Capacity 86
Mailing Address 135 MEADOWLAN		County SAINT CHARLES	DMH Licensed No
O'FALLON	MO 63366-4591	Region 5	Facility Number 26475
ATHENE NURSING AND REHABII	LITATION		
13995 CLAYTON RD		<b>Telephone</b> (636) 227-5070	Alzheimer's Unit Yes
TOWN AND COUNTRY	MO 63017-8400	Level of Care: SNF	<b>Bed Capacity</b> 282
Mailing Address 13995 CLAYTON R	D	County SAINT LOUIS COUNTY	<b>DMH Licensed</b> No
TOWN AND COUNTRY	MO 63017-8400	Region 7 Medicare/Medicaid	Facility Number 01508

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ATRIUM PLACE HEALTH AND RE	HABILITATION		
2600 REDMAN RD		<b>Telephone</b> (314) 355-8585	Alzheimer's Unit No
SAINT LOUIS	MO 63136-5863	Level of Care: SNF	<b>Bed Capacity</b> 120
Mailing Address 2600 REDMAN RD		County SAINT LOUIS COUNTY	<b>DMH Licensed</b> No
SAINT LOUIS	MO 63136-5863	Region 7 Medicare/Medicaid	Facility Number 18697
AND	NG DV AMEDICA DE		
AUBURN CREEK - ASSISTED LIVII	NG BY AMERICARE	T. I. 1. (572) (51 0100	All to take the Market Name
2910 BEAVER CREEK DR	MO 63701-1732	<b>Telephone</b> (573) 651-0199	Alzheimer's Unit Yes
CAPE GIRARDEAU		Level of Care: ALF  County CAPE GIRARDEAU	Bed Capacity 53  DMH Licensed No
Mailing Address 2910 BEAVER CREE CAPE GIRARDEAU	MO 63701-1732		
CAPE GIRARDEAU	MO 03/01-1/32	Region 2	Facility Number 19892
AUBURN RIDGE LIVING CENTER			
1425 ASHBURY WAY		<b>Telephone</b> (573) 634-2031	Alzheimer's Unit No
WARDSVILLE	MO 65101-1007	Level of Care: RCF	Bed Capacity 24
Mailing Address 1425 ASHBURY WA	Y	County COLE	DMH Licensed No
WARDSVILLE	MO 65101-1007	Region 6	Facility Number 31832
			•
AURORA HEALTH AND REHABIL	ITATION		
1200 MCCUTCHEN RD		<b>Telephone</b> (573) 364-2311	Alzheimer's Unit No
ROLLA	MO 65401-2615	Level of Care: SNF	Bed Capacity 116
Mailing Address 1200 MCCUTCHEN		County PHELPS	<b>DMH Licensed</b> No
ROLLA	MO 65401-2615	Region 6 Medicare/Medicaid	Facility Number 08862
AURORA NURSING			
1700 SOUTH HUDSON AVE		<b>Telephone</b> (417) 678-2165	Alzheimer's Unit Yes
AURORA	MO 65605-2717	Level of Care: SNF	Bed Capacity 125
Mailing Address 1700 S HUDSON AV		County LAWRENCE	DMH Licensed No
AURORA	MO 65605-2717	Region 1 Medicare/Medicaid	Facility Number 00234
		S	
AUTUMN OAKS CARING CENTER			
1310 HOVIS ST		<b>Telephone</b> (417) 926-5128	Alzheimer's Unit Yes
MOUNTAIN GROVE	MO 65711-1219	Level of Care: SNF	Bed Capacity 120
Mailing Address 1310 HOVIS ST		County WRIGHT	DMH Licensed No
MOUNTAIN GROVE	MO 65711-1219	Region 1 Medicare/Medicaid	Facility Number 07970
AUTUMN PLACE RESIDENTIAL C	ARE OF JOPLIN		
2030 E ZORA ST		<b>Telephone</b> (417) 626-8900	Alzheimer's Unit No
JOPLIN	MO 64801-1170	Level of Care: RCF*	<b>Bed Capacity</b> 38
Mailing Address 2030 E ZORA ST		County JASPER	<b>DMH Licensed</b> No
JOPLIN	MO 64801-1170	Region 1	Facility Number 20779
A LUDY IN AN INDICE RECORDER OF C			
AUTUMN RIDGE RESIDENCES		Tolonhono (626) 021 9400	Alghaiman's Unit
300 AUTUMN RIDGE DR HERCULANEUM	MO 63048 1506	Telephone (636) 931-8400 Level of Care: RCF*	Alzheimer's Unit No Bed Capacity 81
Mailing Address 300 AUTUMN RIDG	MO 63048-1506	County JEFFERSON	Bed Capacity 81  DMH Licensed Yes
HERCULANEUM		•	
HERCULANEUW	MO 63048-1506	Region 2	Facility Number 15845

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AUTUMN VIEW GARDENS				
16219 AUTUMN VIEW TERRACE DR		<b>Telephone</b> (636) 458-5225	Alzheimer's Unit	Yes
ELLISVILLE	MO 63011-4743	Level of Care: ALF**	Bed Capacity	150
Mailing Address 16219 AUTUMN VIEW	TERRACE DR	County SAINT LOUIS COUNTY	DMH Licensed	No
ELLISVILLE	MO 63011-4743	Region 7	Facility Number 2	20751
AUTUMN VIEW GARDENS AT SCHU	ETZ ROAD			
11210 SCHUETZ RD		<b>Telephone</b> (314) 993-9888	Alzheimer's Unit	Yes
SAINT LOUIS	MO 63146-4933	Level of Care: ALF**	Bed Capacity	110
Mailing Address 11210 SCHUETZ RD		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63146-4933	Region 7	Facility Number 2	22909
AUTUMN WOODS, INC				
5500 NW HOUSTON LAKE DR		<b>Telephone</b> (816) 587-2263	Alzheimer's Unit	No
KANSAS CITY	MO 64151-3472	Level of Care: RCF*	Bed Capacity	28
Mailing Address PO BOX 12008		County PLATTE	DMH Licensed	Yes
KANSAS CITY	MO 64152-0008	Region 4	Facility Number 1	0857
AVA PLACE				
1101 LYLE STREET		<b>Telephone</b> (417) 683-6999	Alzheimer's Unit	No
	MO 65608-1269	Level of Care: RCF*	Bed Capacity	40
Mailing Address PO BOX 1269		County DOUGLAS	DMH Licensed	Yes
AVA	MO 65608-1269	Region 1	Facility Number 2	20718
ANALY ON GARDEN				
AVALON GARDEN		T. I. I. (214) 752 2022		
4359 TAFT AVE		<b>Telephone</b> (314) 752-2022	Alzheimer's Unit	No
	MO 63116-1533	Level of Care: SNF	Bed Capacity	77
Mailing Address 4359 TAFT AVE	NO (011 ( 1500	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS	MO 63116-1533	Region 7 Medicare/Medicaid	Facility Number 0	00244
AVALON MEMORY CARE				
AVALON MEMORY CARE 5342 BUTLER HILL ROAD		<b>Telephone</b> (314) 849-2985	Alzheimer's Unit	Yes
	MO 63128-4152	Level of Care: ALF**	Bed Capacity	30
Mailing Address 5342 BUTLER HILL RO		County SAINT LOUIS COUNTY	DMH Licensed	No
	MO 63128-4152	Region 7		30425
SARVI LOUIS	WIO 03120-4132	Region /	racinty Number 5	0423
AVALON VIEW HEALTH AND WELI	LNESS			
1200 WEST COLLEGE ST		<b>Telephone</b> (816) 781-3020	Alzheimer's Unit	Yes
	MO 64068-1036	Level of Care: SNF	Bed Capacity	140
Mailing Address 1200 WEST COLLEGE		County CLAY	DMH Licensed	No
	MO 64068-1036	Region 4 Medicare/Medicaid		1961
		-	-	
BAILEY HOUSE				
102 BAILEY ST		<b>Telephone</b> (573) 756-6374	Alzheimer's Unit	No
FARMINGTON	MO 63640-1819	Level of Care: RCF	Bed Capacity	12
Mailing Address 102 BAILEY ST		County SAINT FRANCOIS	DMH Licensed	Yes
FARMINGTON	MO 63640-1819	Region 2	Facility Number 0	00256

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D. M. CONT. N. M. DONALO CONT. D. C.				
BAISCH NURSING CENTER 3260 BAISCH DR		<b>Telephone</b> (636) 586-2291	Alzheimer's Unit	No
DE SOTO	MO 63020-5046	<b>Telephone</b> (636) 586-2291 <b>Level of Care:</b> RCF*	Bed Capacity	18
Mailing Address 3260 BAISCH DR	1410 03020-3040	County JEFFERSON	DMH Licensed	No
DE SOTO	MO 63020-5046	Region 2	Facility Number	00910
		August -		00,10
BAISCH NURSING CENTER				
3260 BAISCH DR		<b>Telephone</b> (636) 586-2291	Alzheimer's Unit	No
DE SOTO	MO 63020-5046	Level of Care: SNF	Bed Capacity	61
Mailing Address 3260 BAISCH DR		<b>County</b> JEFFERSON	DMH Licensed	No
DE SOTO	MO 63020-5046	Region 2 Medicare/Medicaid	<b>Facility Number</b>	00910
BAPTIST HOMES OF ADRIAN 402 WEST 1ST STREET		<b>Telephone</b> (816) 297-8901	Alzheimer's Unit	No
ADRIAN	MO 64720-9277	Level of Care: SNF	Bed Capacity	38
Mailing Address 402 WEST 1ST STR		County BATES	DMH Licensed	No
ADRIAN	MO 64720-9277	Region 3 Medicare/Medicaid	Facility Number	00032
		region 5 Neuteur c/Medicula		00032
BAPTIST HOMES OF ARCADIA V	ALLEY			
101 RIGGS-SCOTT LN		<b>Telephone</b> (573) 546-7429	Alzheimer's Unit	No
IRONTON	MO 63650-4338	Level of Care: ICF	Bed Capacity	49
Mailing Address PO BOX 87		County IRON	DMH Licensed	No
IRONTON	MO 63650-0087	Region 2 Medicaid	Facility Number	00274
BAPTIST HOMES OF ARCADIA V	ALLEY			
101 RIGGS-SCOTT LN		<b>Telephone</b> (573) 546-7429	Alzheimer's Unit	No
IRONTON	MO 63650-4338	Level of Care: ALF	Bed Capacity	56
Mailing Address PO BOX 87	150 52550 0005	County IRON	DMH Licensed	No
IRONTON	MO 63650-0087	Region 2	Facility Number	00274
BAPTIST HOMES OF INDEPENDE	ENCE			
17451 MEDICAL CENTER PARKWA		<b>Telephone</b> (816) 373-7795	Alzheimer's Unit	No
INDEPENDENCE	MO 64057-1805	Level of Care: SNF	Bed Capacity	118
Mailing Address 17451 MEDICAL C	ENTER PRKWY	County JACKSON	DMH Licensed	No
INDEPENDENCE	MO 64057-1805	Region 3 Medicare/Medicaid	<b>Facility Number</b>	03782
BAPTIST HOMES OF INDEPENDE				
17451 MEDICAL CENTER PARKWA		<b>Telephone</b> (816) 373-7795	Alzheimer's Unit	NO
INDEPENDENCE	MO 64057-1805	Level of Care: RCF	Bed Capacity	20
Mailing Address 17451 MEDICAL C		County JACKSON	DMH Licensed	No
INDEPENDENCE	MO 64057-1805	Region 3	Facility Number	03782
BAPTIST HOMES OF OZARK				
1625 WEST GARTON RD		<b>Telephone</b> (417) 581-2101	Alzheimer's Unit	No
OZARK	MO 65721-6637	Level of Care: ALF**	Bed Capacity	30
Mailing Address PO BOX 1040		County CHRISTIAN	DMH Licensed	No
OZARK	MO 65721-1040	Region 1	<b>Facility Number</b>	21509

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BAPTIST HOMES OF OZARK		<b>T. 1</b>		
1625 WEST GARTON RD		<b>Telephone</b> (417) 581-2101	Alzheimer's Unit	No
OZARK	MO 65721-6637	Level of Care: ICF	Bed Capacity	33
Mailing Address PO BOX 1040	MO (5721 1040	County CHRISTIAN	DMH Licensed	No
OZARK	MO 65721-1040	Region 1	Facility Number	21509
BAPTIST HOMES, TRI-COUNTY				
601 NORTH GALLOWAY RD		<b>Telephone</b> (573) 594-6467	Alzheimer's Unit	YES
VANDALIA	MO 63382-1252	Level of Care: SNF	Bed Capacity	90
Mailing Address 601 NORTH GALLO		County AUDRAIN	DMH Licensed	No
VANDALIA	MO 63382-1252	Region 5 Medicare/Medicaid	Facility Number	08096
		Tregion - Medical of Medical		00070
BAPTIST HOMES, TRI-COUNTY				
601 NORTH GALLOWAY RD		<b>Telephone</b> (573) 594-6467	Alzheimer's Unit	No
VANDALIA	MO 63382-1252	Level of Care: RCF	<b>Bed Capacity</b>	20
Mailing Address 601 NORTH GALLO	WAY RD	County AUDRAIN	DMH Licensed	No
VANDALIA	MO 63382-1252	Region 5	Facility Number	08096
DADATHAWEN ALTHERATING ON	ECIAL CADE CENTED			
BARATHAVEN ALZHEIMER'S SPI 1030 BARATHAVEN DR	ECIAL CARE CENTER	TELL (626) 220 0160	A11.	Yes
DARDENNE PRAIRIE	MO 63368-8606	Telephone (636) 329-9160 Level of Care: ALF**	Alzheimer's Unit	66
Mailing Address 1030 BARATHAVEN			Bed Capacity  DMH Licensed	No
DARDENNE PRAIRIE	MO 63368-8606	•		
DARDENNE FRAIRIE	MO 03308-8000	Region 5	Facility Number	26902
BARNABAS ACRES				
210 FRANKS LN		<b>Telephone</b> (573) 270-8887	Alzheimer's Unit	No
CAPE GIRARDEAU	MO 63701-8439	Level of Care: ALF	Bed Capacity	56
Mailing Address 210 FRANKS LN		<b>County</b> CAPE GIRARDEAU	DMH Licensed	Yes
CAPE GIRARDEAU	MO 63701-8439	Region 2	Facility Number	05130
BARNABAS REDWOOD MANOR				
1194 LANDON RD		<b>Telephone</b> (573) 468-8150	Alzheimer's Unit	No
BOURBON	MO 65441-8218	Level of Care: RCF	Bed Capacity	47
Mailing Address 1194 LANDON RD		County CRAWFORD	DMH Licensed	Yes
BOURBON	MO 65441-8218	Region 6	Facility Number	08609
BARNES-JEWISH EXTENDED CAR	RE			
401 CORPORATE PARK DR		<b>Telephone</b> (314) 725-7447	Alzheimer's Unit	No
SAINT LOUIS	MO 63105-4201	Level of Care: SNF	Bed Capacity	120
Mailing Address 401 CORPORATE P.	ARK DR	County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63105-4201	Region 7 Medicare/Medicaid	Facility Number	15878
BAYLESS BOARDING HOME				
3719 SAND CREEK ROAD		<b>Telephone</b> (573) 747-0889	Alzheimer's Unit	No
FARMINGTON	MO 63640-7349	Level of Care: RCF	<b>Bed Capacity</b>	12
Mailing Address 3719 SAND CREEK	RD	County SAINT FRANCOIS	DMH Licensed	Yes
FARMINGTON	MO 63640-7349	Region 2	Facility Number	17300

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BEACON HILL RESIDENTIAL CAI 2905 CAMPBELL	RE	<b>Telephone</b> (816) 531-6168	Alabaiman'a Unit No
KANSAS CITY	MO 64109-1417	Telephone (816) 531-6168 Level of Care: RCF*	Alzheimer's Unit No Bed Capacity 37
Mailing Address 2905 CAMPBELL	WO 04109-1417	County JACKSON	DMH Licensed Yes
KANSAS CITY	MO 64109-1417	Region 3	Facility Number 00329
KANDAD CITT	NIO 04107-1417	Region 3	racinty runner 00329
BEAUTIFUL SAVIOR HOME			
1003 SOUTH CEDAR ST		<b>Telephone</b> (816) 331-0781	Alzheimer's Unit No
BELTON	MO 64012-3703	Level of Care: SNF	Bed Capacity 126
Mailing Address 1003 S CEDAR ST		County CASS	DMH Licensed No
BELTON	MO 64012-3703	Region 3 Medicare/Medicaid	Facility Number 00342
BEAUTIFUL SAVIOR HOME			
1003 SOUTH CEDAR ST		<b>Telephone</b> (816) 331-0781	Alzheimer's Unit No
BELTON	MO 64012-3703	Level of Care: ALF	Bed Capacity 55
Mailing Address 1003 S CEDAR ST		County CASS	DMH Licensed No
BELTON	MO 64012-3703	Region 3	Facility Number 00342
BEAUVAIS REHAB AND HEALTH	CARE CENTER		
3625 MAGNOLIA AVE	CIRL CENTER	<b>Telephone</b> (314) 771-2990	Alzheimer's Unit Yes
SAINT LOUIS	MO 63110-4048	Level of Care: SNF	Bed Capacity 184
Mailing Address 3625 MAGNOLIA A		County SAINT LOUIS CITY	DMH Licensed No
SAINT LOUIS	MO 63110-4048	Region 7 Medicare/Medicaid	Facility Number 09528
		770410410	• • • • • • • • • • • • • • • • • • • •
BEEHIVE HOMES OF GRAIN VAL	LEY		
101 CROSS CREEK DR		<b>Telephone</b> (816) 224-2700	Alzheimer's Unit No
GRAIN VALLEY	MO 64029-9561	Level of Care: ALF**	<b>Bed Capacity</b> 32
Mailing Address 101 CROSS CREEK		County JACKSON	<b>DMH Licensed</b> No
GRAIN VALLEY	MO 64029-9561	Region 3	Facility Number 24279
BELLEVIEW CARE CENTER			
1616 WEISENBORN RD		<b>Telephone</b> (816) 232-9874	Alzheimer's Unit Yes
SAINT JOSEPH	MO 64507-2527	Level of Care: SNF	Bed Capacity 90
Mailing Address 1616 WEISENBORN	I RD	County BUCHANAN	DMH Licensed No
SAINT JOSEPH	MO 64508-2527	Region 4 Medicare/Medicaid	Facility Number 10346
BELLEVIEW CARE CENTER			
1616 WEISENBORN RD		<b>Telephone</b> (816) 232-9874	Alzheimer's Unit No
SAINT JOSEPH	MO 64507-2527	Level of Care: ALF	Bed Capacity 100
Mailing Address 1616 WEISENBORN		County BUCHANAN	<b>DMH Licensed</b> Yes
SAINT JOSEPH	MO 64507-2527	Region 4	Facility Number 10346
BELLEVIEW VALLEY NURSING F	ЮМЕ		
23144 HIGHWAY 32		<b>Telephone</b> (573) 697-5311	Alzheimer's Unit No
BELLEVIEW	MO 63623-6346	Level of Care: SNF	Bed Capacity 122
	WIO 03023-0340	Ecter of Care. Sin	200 Supusity 122
Mailing Address 23144 HIGHWAY 32		County IRON	DMH Licensed No
Mailing Address 23144 HIGHWAY 32 BELLEVIEW			- ·

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BELOVED HEALTH AND REHABILIT	TATION CENTER		
328 MUNGER LANE		<b>Telephone</b> (573) 577-2100	Alzheimer's Unit No
HANNIBAL M	MO 63401-2361	Level of Care: SNF	Bed Capacity 111
Mailing Address 328 MUNGER LANE		County MARION	DMH Licensed No
HANNIBAL N	MO 63401-2361	Region 5 Medicare/Medicaid	Facility Number 03340
			·
DEMENICT IOCEDII I ADDE CENTED			
BENEDICT JOSEPH LABRE CENTER 3863 CLEVELAND		The Land (214) 664 2027	AT L. C. L. TI M
	40 (2110 4000	<b>Telephone</b> (314) 664-3927	Alzheimer's Unit No
	MO 63110-4009	Level of Care: RCF	Bed Capacity 15
Mailing Address 3863 CLEVELAND	40 (2110 4000	County SAINT LOUIS CITY	DMH Licensed Yes
SAINT LOUIS N	MO 63110-4009	Region 7	Facility Number 21163
BENTLEYS EXTENDED CARE			
3060 ASHBY ROAD		<b>Telephone</b> (314) 426-0433	Alzheimer's Unit No
OVERLAND N	MO 63114-1342	Level of Care: SNF	<b>Bed Capacity</b> 72
Mailing Address 3060 ASHBY RD		County SAINT LOUIS COUNTY	<b>DMH Licensed</b> No
OVERLAND N	MO 63114-1342	Region 7 Medicare/Medicaid	Facility Number 22613
BENTON HOUSE OF BLUE SPRINGS			
1701 NW JEFFERSON ST		<b>Telephone</b> (816) 224-2727	Alzheimer's Unit Yes
BLUE SPRINGS M	MO 64015-7229	Level of Care: ALF**	<b>Bed Capacity</b> 95
Mailing Address 1701 NW JEFFERSON S	ST	County JACKSON	DMH Licensed No
BLUE SPRINGS N	MO 64015-7229	Region 3	Facility Number 29729
BENTON HOUSE OF RAYMORE			
2100 JOHNSTON DR		<b>Telephone</b> (816) 322-2111	Alzheimer's Unit Yes
	MO 64083-8122	Level of Care: ALF**	Bed Capacity 95
Mailing Address 2100 JOHNSTON DR	VIO 04083-8122	County CASS	DMH Licensed No
	MO (4092 9122	·	
RAYMORE N	MO 64083-8122	Region 3	Facility Number 29896
DENIZON HOUSE OF STATEVIHLES			
BENTON HOUSE OF STALEY HILLS		Tolonhono (816) 272 1000	Alzheimer's Unit Yes
11071 N WOODLAND AVE	160 (4155 1550	<b>Telephone</b> (816) 372-1888	
	MO 64155-1552	Level of Care: ALF**	Bed Capacity 80
Mailing Address 11071 N WOODLAND A		County CLAY	DMH Licensed No
KANSAS CITY N	MO 64155-1552	Region 4	Facility Number 30774
DEMICON HOUSE OF WIFE LAW CORNE	uda		
BENTON HOUSE OF TIFFANY SPRIN	(GS	m 1 1 (010) 505 4555	
5901 NW 88TH ST		<b>Telephone</b> (816) 505-4555	Alzheimer's Unit Yes
	MO 64154-1607	Level of Care: ALF**	<b>Bed Capacity</b> 80
Mailing Address 5901 NW 88TH ST		County PLATTE	<b>DMH Licensed</b> No
KANSAS CITY N	MO 64154-1607	Region 4	Facility Number 29519
DD1/m/10.0D 1/m/D2			
BENTWOOD NURSING & REHAB		T-1	Alabada anti TT 14
1501 CHARBONIER RD	10 (2021 5200	<b>Telephone</b> (314) 921-2700	Alzheimer's Unit No
	MO 63031-5308	Level of Care: SNF	Bed Capacity 116
Mailing Address 1501 CHARBONIER RE		County SAINT LOUIS COUNTY	DMH Licensed No
FLORISSANT M	MO 63031-5308	Region 7 Medicare/Medicaid	Facility Number 14817

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BERNARD CARE CENTER					
4335 WEST PINE BLVD		Telephone	(314) 371-0200	Alzheimer's Unit	No
SAINT LOUIS MO	63108-2205	Level of Care:	: SNF	Bed Capacity	141
Mailing Address 4335 WEST PINE BLVD		County SA	AINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS MO	63108-2205	Region 7	Medicare/Medicaid	Facility Number	00436
		Ü			
BERTRAND NURSING AND REHAB CEN	TED				
603 WEST HIGHWAY 62	IER	Telephone	(573) 683-4290	Alzheimer's Unit	No
	63823-9738	Level of Care:		Bed Capacity	60
	03823-9738		ISSISSIPPI		No
Mailing Address 603 WEST HIGHWAY 62 BERTRAND MO	63823-9738			DMH Licensed	
BERTRAND MO	03823-9738	Region 2	Medicare/Medicaid	Facility Number	00440
NEW WAYEN NURSENIG WOME					
BETH HAVEN NURSING HOME		m 1 1	(572) 221 (000	A11 TT.4	37
2500 PLEASANT ST	c2401 2c00	Telephone	(573) 221-6000	Alzheimer's Unit	Yes
	63401-2600	Level of Care:		Bed Capacity	105
Mailing Address 2500 PLEASANT ST	52.104.2.500		ARION	DMH Licensed	No
HANNIBAL MO	63401-2600	Region 5	Medicare/Medicaid	Facility Number	00469
DETHECO A DII WODTH					
BETHESDA DILWORTH		m 1 1	(214) 060 5460	A1 1 1 1 TT 14	Yes
9645 BIG BEND BLVD	(2122 (521	Telephone	(314) 968-5460	Alzheimer's Unit	400
	63122-6521	Level of Care:		Bed Capacity	
Mailing Address 9645 BIG BEND BLVD	(2122 (521	-	AINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS MO	63122-6521	Region 7	Medicare/Medicaid	Facility Number	00508
BETHESDA HAWTHORNE PLACE					
1111 SOUTH BERRY ROAD		Telephone	(314) 942-5750	Alzheimer's Unit	Yes
	63122-6598	Level of Care:	` ′	Bed Capacity	66
Mailing Address 1111 SOUTH BERRY ROA			AINT LOUIS COUNTY	DMH Licensed	No
•	63122-6598	-	AINT LOUIS COUNTT	Facility Number	
SAINT LOUIS MO	03122-0398	Region 7		racinty Number	30509
BETHESDA SOUTHGATE					
5943 TELEGRAPH RD		Telephone	(314) 846-2000	Alzheimer's Unit	Yes
	63129-4715	Level of Care:		Bed Capacity	192
Mailing Address 5943 TELEGRAPH RD			AINT LOUIS COUNTY	DMH Licensed	No
· ·	63129-4715	Region 7	Medicare/Medicaid	Facility Number	05586
S.M.Y Eccis	03127 1713	Region ,	Wiculcar of Wiculcard	Tuestity Tumber	03300
BIG BEND RETREAT					
620 NORTH EMMERSON		Telephone	(660) 529-2237	Alzheimer's Unit	No
SLATER MO	65349-1157	Level of Care:		Bed Capacity	60
Mailing Address 620 NORTH EMMERSON			ALINE	DMH Licensed	No
· ·	65349-1157	Region 5		Facility Number	00546
		S		•	
BIG BEND RETREAT					
620 NORTH EMMERSON		Telephone	(660) 529-2237	Alzheimer's Unit	No
SLATER MO	65349-1157	Level of Care:	: RCF*	<b>Bed Capacity</b>	10
Mailing Address 620 NORTH EMMERSON		County SA	ALINE	DMH Licensed	No
		_			

**Facility Number** 

00546

MO 65349-1157

SLATER

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BIG BEND WOODS HEALTHCARE CENTER			
110 HIGHLAND AVE	<b>Telephone</b> (636) 529-8300	Alzheimer's Unit	No
VALLEY PARK MO 63088-1422	Level of Care: SNF	Bed Capacity	135
Mailing Address 110 HIGHLAND AVE	County SAINT LOUIS COUNTY	DMH Licensed	No
VALLEY PARK MO 63088-1422	Region 7 Medicare/Medicaid	Facility Number	01170
BIG SPRING CARE CENTER FOR REHAB AND HEALTHCARE			
202 EAST MILL ST	<b>Telephone</b> (417) 754-8711	Alzheimer's Unit	No
HUMANSVILLE MO 65674-8507	Level of Care: SNF	Bed Capacity	60
Mailing Address 202 EAST MILL ST	County POLK	DMH Licensed	No
HUMANSVILLE MO 65674-8507	Region 1 Medicare/Medicaid	Facility Number	18672
TOWN TO STATE OF THE STATE OF T	Region 1 Medical e/Medicalu	racinty runner	10072
DID CHI DOLLATE ME A TAN AND DEMA DA ME TAON			
BIRCH POINTE HEALTH AND REHABILITATION	(417) 000 0772		**
3705 S JEFFERSON AVE	<b>Telephone</b> (417) 889-0773	Alzheimer's Unit	Yes
SPRINGFIELD MO 65807-5880	Level of Care: SNF	Bed Capacity	120
Mailing Address 3705 S JEFFERSON AVE	County GREENE	DMH Licensed	No
SPRINGFIELD MO 65807-5880	Region 1 Medicare/Medicaid	Facility Number	31013
Navon annuar N : az zua zue			
BISHOP SPENCER PLACE, INC, THE			
4301 MADISON AVE	<b>Telephone</b> (816) 931-4277	Alzheimer's Unit	No
KANSAS CITY MO 64111-3491	Level of Care: ALF**	Bed Capacity	40
Mailing Address 4301 MADISON AVE	County JACKSON	DMH Licensed	No
KANSAS CITY MO 64111-3491	Region 3	Facility Number	20635
Navon annuar ny tan-nya avy			
BISHOP SPENCER PLACE, INC, THE	T. 1 (015) 001 1077		
4301 MADISON AVE	<b>Telephone</b> (816) 931-4277	Alzheimer's Unit	No
KANSAS CITY MO 64111-3491	Level of Care: SNF	Bed Capacity	57
Mailing Address 4301 MADISON AVE	County JACKSON	DMH Licensed	No
KANSAS CITY MO 64111-3491	Region 3 Medicare/Medicaid	Facility Number	20635
DI ESCINC CENTED THE			
BLESSING CENTER, THE 302 NORTH MAIN	<b>Telephone</b> (660) 397-2293	Alzheimer's Unit	No
EDINA MO 63537-1353	Level of Care: RCF	Bed Capacity	51
Mailing Address 302 NORTH MAIN EDINA MO 63537-1353	•	DMH Licensed Facility Number	Yes 03728
EDINA WIO 03337-1333	Region 5	Pacinty Number	03728
BLUE CASTLE BOLIVAR LLC			
1830 E LAVERNE ST	<b>Telephone</b> (417) 777-2583	Alzheimer's Unit	No
BOLIVAR MO 65613-1488	Level of Care: RCF*	Bed Capacity	30
Mailing Address 1830 E LAVERNE ST	County POLK	DMH Licensed	Yes
	•		
BOLIVAR MO 65613-1488	Region 1	Facility Number	24698
BLUE CIRCLE REHAB AND NURSING			
2939 MAGAZINE STREET	<b>Telephone</b> (314) 531-0500	Alzheimer's Unit	No
SAINT LOUIS MO 63106-1245	Level of Care: SNF	Bed Capacity	90
Mailing Address 2939 MAGAZINE STREET	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS MO 63106-1245	Region 7 Medicare/Medicaid	Facility Number	15258
5.11.1 25015	region / Wiculcare/Miculcalu	- acmey rumber	13230

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BLUE HILLS REST HOME, INC				
2207 NORTH BLUE MILLS RD		<b>Telephone</b> (816) 796-3376	Alzheimer's Unit	No
INDEPENDENCE MO	O 64058-2022	Level of Care: ALF**	<b>Bed Capacity</b>	63
Mailing Address 2207 N BLUE MILLS RD	1	County JACKSON	DMH Licensed	No
INDEPENDENCE MO	O 64058-2022	Region 3	<b>Facility Number</b>	11146
BLUEBIRD WELLNESS AND REHABIL	ITATION			
9350 GREEN PARK ROAD		<b>Telephone</b> (314) 845-0900	Alzheimer's Unit	Yes
	O 63123-7211	Level of Care: SNF	Bed Capacity	188
Mailing Address 9350 GREEN PARK ROA		County SAINT LOUIS COUNTY	DMH Licensed	No
	O 63123-7211	Region 7 Medicare/Medicaid	Facility Number	17565
		g		
BLUEGRASS TERRACE				
102 REDTAIL DR		<b>Telephone</b> (573) 657-0899	Alzheimer's Unit	No
	O 65010-1179	Level of Care: RCF	Bed Capacity	16
Mailing Address 102 REDTAIL DR		County BOONE	DMH Licensed	No
•	O 65010-1179	Region 6	Facility Number	25731
				20,01
BLUFF CREEK TERRACE - ASSISTED	LIVING BY AMERICARE			
3104 BLUFF CREEK DR		<b>Telephone</b> (573) 815-9111	Alzheimer's Unit	Yes
COLUMBIA MO	O 65201-3524	Level of Care: ALF**	Bed Capacity	48
Mailing Address 3104 BLUFF CREEK DR		County BOONE	DMH Licensed	No
_	O 65201-3524	Region 6	Facility Number	20625
				20025
BLUFFS, THE				
3105 BLUFF CREEK DR		<b>Telephone</b> (573) 442-6060	Alzheimer's Unit	Yes
	O 65201-3529	Level of Care: SNF	Bed Capacity	132
Mailing Address 3105 BLUFF CREEK DR		County BOONE	DMH Licensed	No
-	O 65201-3529	Region 6 Medicare/Medicaid	Facility Number	00754
			·	
BOARDING INN, THE				
9444 MIDLAND BLVD		<b>Telephone</b> (314) 426-0091	Alzheimer's Unit	No
OVERLAND MO	0 63114-3328	Level of Care: RCF	Bed Capacity	40
Mailing Address 9444 MIDLAND BLVD		County SAINT LOUIS COUNTY	DMH Licensed	Yes
-	O 63114-3328	Region 7	Facility Number	00709
BOLIVAR MANOR HOUSE				
404 EAST BROADWAY		<b>Telephone</b> (417) 327-5790	Alzheimer's Unit	No
BOLIVAR MO	O 65613-2019	Level of Care: RCF*	<b>Bed Capacity</b>	20
Mailing Address PO BOX 175		County POLK	DMH Licensed	Yes
BOLIVAR MO	O 65613-0175	Region 1	Facility Number	04529
BOULEVARD SENIOR LIVING OF ST C	CHARLES,THE	Tolonhono ((2)) 757 5077	Alaboiment Tint	<b>V</b> -
3340 EHLMANN ROAD	2 62201 4097	Telephone (636) 757-5077	Alzheimer's Unit	Yes
	O 63301-4087	Level of Care: ALF**	Bed Capacity	128
Mailing Address 3340 EHLMANN ROAD	2 62201 4097	County SAINT CHARLES	DMH Licensed	No

**Facility Number** 

31029

MO 63301-4087

SAINT CHARLES

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BOULEVARD SENIOR LIVING OF	ST PETERS, THE			
500 BLUFFSTONE CIRCLE		<b>Telephone</b> (636) 626-2520	Alzheimer's Unit	Yes
ST PETERS	MO 63304-2736	Level of Care: ALF**	Bed Capacity	74
Mailing Address 500 BLUFFSTONE C	IRCLE	County ST CHARLES	DMH Licensed	No
ST PETERS	MO 63304-2736	Region 5	Facility Number	33475
BOULEVARD SENIOR LIVING OF	WENTZVII I F THE			
120 PERRY CATE BOULEVARD	WENTZVILLE, THE	<b>Telephone</b> (636) 698-9458	Alzheimer's Unit	Yes
WENTZVILLE	MO 63385-4719	Level of Care: ALF**	Bed Capacity	62
Mailing Address 120 PERRY CATE BO		County SAINT CHARLES	DMH Licensed	No
WENTZVILLE	MO 63385-4719	Region 5	Facility Number	31404
WENTZVILLE	WO 03383-4719	Region 3	racinty Number	31404
BOWLING GREEN RESIDENTIAL	CARE			
119 WEST CENTENNIAL AVE		<b>Telephone</b> (573) 324-5560	Alzheimer's Unit	No
BOWLING GREEN	MO 63334-1605	Level of Care: RCF*	Bed Capacity	35
Mailing Address 119 WEST CENTEN		County PIKE	DMH Licensed	Yes
BOWLING GREEN	MO 63334-1605	Region 5	Facility Number	07712
BRADFORD COURT - ASSISTED LI	VING BY AMERICARE			
902 NORTH MAIN		<b>Telephone</b> (417) 725-0177	Alzheimer's Unit	No
NIXA	MO 65714-9384	Level of Care: ALF**	Bed Capacity	50
Mailing Address 902 NORTH MAIN		County CHRISTIAN	DMH Licensed	No
NIXA	MO 65714-9384	Region 1	Facility Number	17732
BRENT B TINNIN MANOR				
220 EUEL POLK DR		<b>Telephone</b> (573) 663-2545	Alzheimer's Unit	No
ELLINGTON	MO 63638-7967	Level of Care: SNF	Bed Capacity	60
Mailing Address 220 EUEL POLK DR		County REYNOLDS	DMH Licensed	No
ELLINGTON	MO 63638-7967	Region 2 Medicare/Medicaid	Facility Number	08027
		region - medical control		00027
BRENTMOOR RETIREMENT COM	MUNITY	m. 1		
8600 DELMAR BLVD	110 - 1010 1 1070	<b>Telephone</b> (314) 995-3811	Alzheimer's Unit	No
SAINT LOUIS	MO 63124-1973	Level of Care: ALF**	Bed Capacity	36
Mailing Address 8600 DELMAR BLVI		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63124-1973	Region 7	Facility Number	19968
BRIDGEWOOD HEALTH CARE CE	NTER			
11515 TROOST		<b>Telephone</b> (816) 943-0101	Alzheimer's Unit	NO
KANSAS CITY	MO 64131-3769	Level of Care: SNF	Bed Capacity	166
Mailing Address 11515 TROOST		County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64131-3769	Region 3 Medicare/Medicaid	Facility Number	06555
BRISTOL MANOR OF AURORA				
740 SOUTH HUDSON		<b>Telephone</b> (417) 678-7535	Alzheimer's Unit	No
AURORA	MO 65605-2512	Level of Care: RCF	Bed Capacity	12
Mailing Address 740 SOUTH HUDSOI		County LAWRENCE	DMH Licensed	No
AURORA	MO 65605-2512	Region 1	Facility Number	20352
	-	- <del>8</del>	• · · · · · · · · · · · · · · · · · · ·	

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BRISTOL MANOR OF BETHANY			
811 SOUTH 24TH ST		<b>Telephone</b> (660) 425-7133	Alzheimer's Unit No
BETHANY	MO 64424-2631	Level of Care: RCF	<b>Bed Capacity</b> 12
Mailing Address 811 SOUTH 24TH ST		County HARRISON	<b>DMH Licensed</b> No
BETHANY	MO 64424-2631	Region 4	Facility Number 19068
BRISTOL MANOR OF BOONVILLE			
1290 ASHLEY RD		<b>Telephone</b> (660) 882-3393	Alzheimer's Unit No
BOONVILLE	MO 65233-2108	Level of Care: RCF	Bed Capacity 12
Mailing Address 1290 ASHLEY RD		County COOPER	DMH Licensed No
BOONVILLE	MO 65233-2108	Region 6	Facility Number 17310
			•
	_		
BRISTOL MANOR OF BROOKFIEL	D	T. 1 . 1	
338 THOMPSON	MO (4(20 2410	<b>Telephone</b> (660) 258-5065	Alzheimer's Unit No
BROOKFIELD	MO 64628-2419	Level of Care: RCF	Bed Capacity 12
Mailing Address 338 THOMPSON	MO (4(20 2410	County LINN	DMH Licensed No
BROOKFIELD	MO 64628-2419	Region 5	Facility Number 18666
BRISTOL MANOR OF BUFFALO			
1002 SOUTH BIRCH		<b>Telephone</b> (417) 345-5500	Alzheimer's Unit No
BUFFALO	MO 65622-9455	Level of Care: RCF	Bed Capacity 12
Mailing Address 1002 SOUTH BIRCH		County DALLAS	DMH Licensed No
BUFFALO	MO 65622-9455	Region 1	Facility Number 18142
BRISTOL MANOR OF BUTLER			
411 SOUTH DELAWARE		<b>Telephone</b> (660) 679-3661	Alzheimer's Unit No
BUTLER	MO 64730-2311	Level of Care: RCF	Bed Capacity 12
Mailing Address 411 SOUTH DELAWA		County BATES	DMH Licensed No
BUTLER	MO 64730-2311	Region 3	Facility Number 18817
_ 0		Region	1001,
BRISTOL MANOR OF CALIFORNIA	Δ		
605 PARKVIEW DR		<b>Telephone</b> (573) 796-4342	Alzheimer's Unit No
CALIFORNIA	MO 65018-2001	Level of Care: RCF	<b>Bed Capacity</b> 12
Mailing Address 605 PARKVIEW DR		County MONITEAU	DMH Licensed No
CALIFORNIA	MO 65018-2001	Region 6	Facility Number 17401
BRISTOL MANOR OF CAMDENTO	N		
75 FOURTH ST		<b>Telephone</b> (573) 346-6800	Alzheimer's Unit No
CAMDENTON	MO 65020-6891	Level of Care: RCF	Bed Capacity 12
Mailing Address 75 FOURTH ST		County CAMDEN	DMH Licensed No
CAMDENTON	MO 65020-6891	Region 6	Facility Number 17914
BRISTOL MANOR OF CAMERON			
920 NORTH HARRIS		<b>Telephone</b> (816) 632-6133	Alzheimer's Unit No
CAMERON	MO 64429-1145	Level of Care: RCF	Bed Capacity 12
Mailing Address 920 NORTH HARRIS	110 0112/1113	County CLINTON	DMH Licensed No
CAMERON	MO 64429-1145	Region 4	Facility Number 18295
C. IIIIIIIII	1110 07727 1173	region -	10293

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BRISTOL MANOR OF CARROLLTON 1016 EAST 10TH ST		Talanhana	(660) 542 2240	Alzheimer's Unit	No
	MO 64633-9348	Telephone Level of Care:	(660) 542-2349 RCF	Bed Capacity	12
Mailing Address 1016 EAST 10TH ST	VIO 04033-9346		ROLL	DMH Licensed	No
	MO 64633-9348	Region 4	ROLL	Facility Number	18316
C. H. C. C. L. C.	120 01033 73 10	Region		Tuestily Tuniber	10310
BRISTOL MANOR OF CARTHAGE					
2131 SOUTH RIVER AVE		Telephone	(417) 358-9788	Alzheimer's Unit	No
	MO 64836-3350	Level of Care:	RCF	Bed Capacity	12
Mailing Address 2131 S RIVER AVE		County JASF	PER	DMH Licensed	Yes
	MO 64836-3350	Region 1		Facility Number	20858
DDICTOL MANOD OF CENTERALIA					
BRISTOL MANOR OF CENTRALIA 610 NORTH JEFFERSON ST		Telephone	(573) 682-5913	Alzheimer's Unit	No
	MO 65240-1178	Level of Care:	RCF	Bed Capacity	12
Mailing Address 610 NORTH JEFFERSO		County BOO		DMH Licensed	No
· ·	MO 65240-1178	Region 6	ALL.	Facility Number	18286
CEATHA IEM	10 03210 1170	Region 0		Tuesty Tumber	10200
BRISTOL MANOR OF CLINTON					
1402 EAST FRANKLIN		Telephone	(660) 885-8391	Alzheimer's Unit	No
CLINTON	MO 64735-1768	Level of Care:	RCF	<b>Bed Capacity</b>	12
Mailing Address 1402 EAST FRANKLIN		County HEN	RY	DMH Licensed	No
CLINTON	MO 64735-1768	Region 1		Facility Number	16656
PRICTOL MANOR OF ELDON					
BRISTOL MANOR OF ELDON 1201 EAST NORTH ST		Telephone	(573) 392-1200	Alzheimer's Unit	No
	MO 65026-2651	Level of Care:	RCF	Bed Capacity	12
Mailing Address 1201 EAST NORTH ST	VIO 03020-2031	County MILI		DMH Licensed	No
-	MO 65026-2651	Region 6	LLK	Facility Number	17701
LEDON .	10 03020 2031	Region 0		Tuestily Tuniber	17701
BRISTOL MANOR OF ELSBERRY					
1402 RIVERVIEW DR		Telephone	(573) 898-5955	Alzheimer's Unit	No
ELSBERRY	MO 63343-1612	Level of Care:	RCF	<b>Bed Capacity</b>	12
Mailing Address 1402 RIVERVIEW DR		County LINC	COLN	DMH Licensed	No
ELSBERRY	MO 63343-1612	Region 5		Facility Number	20015
BRISTOL MANOR OF FULTON					
750 SIGN PAINTER ROAD		Telephone	(573) 642-7557	Alzheimer's Unit	No
	MO 65251-2514	•	RCF	Bed Capacity	12
			LAWAY	DMH Licensed	No
Mailing Address 750 SIGN PAINTER RD		004449	2	Divini Dicember	
Mailing Address 750 SIGN PAINTER RD FULTON		Region 6		Facility Number	18575
	MO 65251-2514	Region 6		Facility Number	18575
		Region 6		Facility Number	18575
FULTON M		Telephone	(816) 732-6789	Facility Number  Alzheimer's Unit	18575 No
BRISTOL MANOR OF HOLDEN 501 WEST SECOND HOLDEN		Telephone Level of Care:	RCF	Alzheimer's Unit Bed Capacity	No 12
BRISTOL MANOR OF HOLDEN 501 WEST SECOND HOLDEN Mailing Address 501 WEST SECOND	MO 65251-2514	Telephone Level of Care:	` '	Alzheimer's Unit	No

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BRISTOL MANOR OF JEFFERSON CITY				
510 KENSINGTON PARK		<b>Telephone</b> (573) 761-5772	Alzheimer's Unit No	)
JEFFERSON CITY MO	65109-6247	Level of Care: RCF	Bed Capacity 12	2
Mailing Address 510 KENSINGTON PARK		County COLE	DMH Licensed No	)
JEFFERSON CITY MO	65109-6247	Region 6	Facility Number 20116	5
BRISTOL MANOR OF LAMAR				
603 EAST 17TH ST		<b>Telephone</b> (417) 682-6762	Alzheimer's Unit No	)
	64759-2303	Level of Care: RCF	Bed Capacity 12	
Mailing Address 603 EAST 17TH ST		County BARTON	DMH Licensed No	О
· ·	64759-2303	Region 1	Facility Number 1895	
	01707 2000	Region 1	Tuelley Number 1093.	L
BRISTOL MANOR OF LEXINGTON				
2615 MAIN ST		<b>Telephone</b> (660) 259-6655	Alzheimer's Unit No	
	64067-1974	Level of Care: RCF	Bed Capacity 12	
Mailing Address 2615 MAIN ST		County LAFAYETTE	DMH Licensed No	)
LEXINGTON MO	64067-1974	Region 3	Facility Number 17543	3
BRISTOL MANOR OF LINCOLN				
204 SOUTH HIGHWAY 65		<b>Telephone</b> (660) 547-2580	Alzheimer's Unit No	)
LINCOLN MO	65338-2587	Level of Care: RCF	Bed Capacity 12	2
Mailing Address 204 SOUTH HIGHWAY 65		County BENTON	DMH Licensed No	0
	65338-2587	Region 6	Facility Number 18092	2
BRISTOL MANOR OF MACON		T. I. I. (650) 205 2020		
707 RANCHLAND DR	cassa 1004	<b>Telephone</b> (660) 385-3020	Alzheimer's Unit No	
	63552-1994	Level of Care: RCF	Bed Capacity 12	
Mailing Address 707 RANCHLAND DR	cassa 1004	County MACON	DMH Licensed No	
MACON MO	63552-1994	Region 5	Facility Number 17865	)
BRISTOL MANOR OF MARCELINE				
102 EAST HAYDEN		<b>Telephone</b> (660) 376-2210	Alzheimer's Unit No	)
MARCELINE MO	64658-2003	Level of Care: RCF	Bed Capacity 12	2
Mailing Address 102 EAST HAYDEN		County LINN	DMH Licensed No	Э
MARCELINE MO	64658-2003	Region 5	Facility Number 17764	1
DDICTOL MANOD OF MADVALLE				
BRISTOL MANOR OF MARYVILLE		The Land (CCO) 592 4121	All to delta	_
323 EAST SUMMIT DR	(4469-2610	<b>Telephone</b> (660) 582-4131	Alzheimer's Unit No	
	64468-3619	Level of Care: RCF	Bed Capacity 12 DMH Licensed No.	
Mailing Address 323 EAST SUMMIT DR	(4460-2610	County NODAWAY		
MARYVILLE MO	64468-3619	Region 4	Facility Number 19843	,
BRISTOL MANOR OF MONROE CITY				
1017 EAST LAWN ST		<b>Telephone</b> (573) 735-3068	Alzheimer's Unit No	)
MONROE CITY MO	63456-1433	Level of Care: RCF	Bed Capacity 12	2
Mailing Address 1017 EAST LAWN ST		County MONROE	DMH Licensed Ye	s
MONROE CITY MO	63456-1433	Region 5	Facility Number 20045	5

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BRISTOL MANOR OF NEVADA				
401 EAST WALNUT		<b>Telephone</b> (417) 667-5700	Alzheimer's Unit No	)
NEVADA	MO 64772-2457	Level of Care: RCF	Bed Capacity 12	2
Mailing Address 401 EAST WALNUT		County VERNON	DMH Licensed Yes	š
NEVADA	MO 64772-2457	Region 1	Facility Number 18471	1
BRISTOL MANOR OF OAK GROVE	E	m 1 1 (016) (05 0601		
300 NORTH AUSTIN	N	<b>Telephone</b> (816) 625-8691	Alzheimer's Unit No	
OAK GROVE	MO 64075-8109	Level of Care: RCF	Bed Capacity 12	
Mailing Address 300 N AUSTIN	N	County JACKSON	DMH Licensed No	
OAK GROVE	MO 64075-8109	Region 3	Facility Number 16552	2
BRISTOL MANOR OF ODESSA				
115 SOUTH 5TH ST		<b>Telephone</b> (816) 633-8692	Alzheimer's Unit No	)
ODESSA	MO 64076-1330	Level of Care: RCF	Bed Capacity 12	
Mailing Address 115 S 5TH ST		County LAFAYETTE	DMH Licensed No	
ODESSA	MO 64076-1330	Region 3	Facility Number 16547	
02230.1	1120 01070 1220	Region 5	10347	
BRISTOL MANOR OF PACIFIC				
2049 ROSE LN		<b>Telephone</b> (636) 257-8020	Alzheimer's Unit No	)
PACIFIC	MO 63069-1165	Level of Care: RCF	Bed Capacity 12	2
Mailing Address 2049 ROSE LN		County FRANKLIN	DMH Licensed No.	)
PACIFIC	MO 63069-1165	Region 6	Facility Number 20237	1
BRISTOL MANOR OF PALMYRA				
1815 SOUTH MAIN		<b>Telephone</b> (573) 769-2127	Alzheimer's Unit No	)
PALMYRA	MO 63461-1961	Level of Care: RCF	Bed Capacity 12	
Mailing Address 1815 SOUTH MAIN		County MARION	DMH Licensed No	)
PALMYRA	MO 63461-1961	Region 5	Facility Number 20260	)
BRISTOL MANOR OF PLEASANT F	HILL	T. 1. 1. (016) 007 0560		
2124 HIGHRIDGE	MO (4000 1010	<b>Telephone</b> (816) 987-2562	Alzheimer's Unit No	
PLEASANT HILL	MO 64080-1912	Level of Care: RCF	Bed Capacity 12	
Mailing Address 2124 HIGHRIDGE	NO 64000 1010	County CASS	DMH Licensed No	
PLEASANT HILL	MO 64080-1912	Region 3	Facility Number 16538	Ś
BRISTOL MANOR OF PRINCETON	ſ			
200 NORTH FULLERTON		<b>Telephone</b> (660) 748-4354	Alzheimer's Unit No	)
PRINCETON	MO 64673-1176	Level of Care: RCF	Bed Capacity 12	2
Mailing Address 200 N FULLERTON		County MERCER	DMH Licensed No.	)
PRINCETON	MO 64673-1176	Region 4	Facility Number 18846	5
BRISTOL MANOR OF RAYMORE				
604 EAST SUNRISE DR		<b>Telephone</b> (816) 322-6782	Alzheimer's Unit No	)
RAYMORE	MO 64083-9037	Level of Care: RCF	Bed Capacity 12	
Mailing Address 604 EAST SUNRISE		County CASS	DMH Licensed No	
			***	

**Facility Number** 

19730

MO 64083-9037

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BRISTOL MANOR OF REPUBLIC				
634 EAST HIGHWAY 174		<b>Telephone</b> (417) 732-8998	Alzheimer's Unit	No
REPUBLIC	MO 65738-1124	Level of Care: RCF	Bed Capacity	12
Mailing Address 634 EAST HWY 174		County GREENE	DMH Licensed	No
REPUBLIC	MO 65738-1124	Region 1	Facility Number	20841
		region -		200.1
BRISTOL MANOR OF SALISBURY				
102 NORTH WILLIE ST		<b>Telephone</b> (660) 388-5728	Alzheimer's Unit	No
SALISBURY	MO 65281-1458	Level of Care: RCF	<b>Bed Capacity</b>	12
Mailing Address 102 NORTH WILLIE	ST	County CHARITON	DMH Licensed	No
SALISBURY	MO 65281-1458	Region 5	Facility Number	18325
BRISTOL MANOR OF SEDALIA				
1208 EAST 24TH ST		<b>Telephone</b> (660) 827-2028	Alzheimer's Unit	No
SEDALIA	MO 65301-8231	Level of Care: RCF	Bed Capacity	12
Mailing Address 1208 EAST 24TH ST		County PETTIS	DMH Licensed	No
SEDALIA	MO 65301-8231	Region 6	Facility Number	15808
			·	
BRISTOL MANOR OF SMITHVILL	E			
1502 SOUTH COMMERCIAL		<b>Telephone</b> (816) 532-4490	Alzheimer's Unit	No
SMITHVILLE	MO 64089-8474	Level of Care: RCF	Bed Capacity	12
Mailing Address 1502 S COMMERCIA		County CLAY	DMH Licensed	No
SMITHVILLE	MO 64089-8474	Region 4	Facility Number	17515
BRISTOL MANOR OF STOVER				
607 WEST 4TH ST		<b>Telephone</b> (573) 377-4519	Alzheimer's Unit	No
STOVER	MO 65078-0807	Level of Care: RCF	Bed Capacity	12
	1410 03070 0007	Level of Care: KCr		12
Mailing Address 607 WEST 4TH ST	110 03070 0007	County MORGAN	DMH Licensed	No
Mailing Address 607 WEST 4TH ST STOVER	MO 65078-0807			
•		<b>County</b> MORGAN	DMH Licensed	No
STOVER		<b>County</b> MORGAN	DMH Licensed	No
STOVER  BRISTOL MANOR OF TRENTON		County MORGAN Region 6	DMH Licensed Facility Number	No 18863
STOVER  BRISTOL MANOR OF TRENTON 1701 EAST 28TH ST	MO 65078-0807	County MORGAN Region 6  Telephone (660) 359-5599	DMH Licensed Facility Number  Alzheimer's Unit	No 18863 No
BRISTOL MANOR OF TRENTON 1701 EAST 28TH ST TRENTON	MO 65078-0807	County MORGAN Region 6  Telephone (660) 359-5599 Level of Care: RCF	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	No 18863 No 12
BRISTOL MANOR OF TRENTON 1701 EAST 28TH ST TRENTON Mailing Address 1701 EAST 28TH ST TRENTON	MO 65078-0807  MO 64683-1177  MO 64683-1177	County MORGAN Region 6  Telephone (660) 359-5599 Level of Care: RCF County GRUNDY	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	No 18863 No 12 No
BRISTOL MANOR OF TRENTON 1701 EAST 28TH ST TRENTON Mailing Address 1701 EAST 28TH ST TRENTON BRISTOL MANOR OF UNIONVILL	MO 65078-0807  MO 64683-1177  MO 64683-1177	County MORGAN Region 6  Telephone (660) 359-5599 Level of Care: RCF County GRUNDY Region 4	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 18863 No 12 No 18597
BRISTOL MANOR OF TRENTON 1701 EAST 28TH ST TRENTON Mailing Address 1701 EAST 28TH ST TRENTON	MO 65078-0807  MO 64683-1177  MO 64683-1177	County MORGAN Region 6  Telephone (660) 359-5599 Level of Care: RCF County GRUNDY	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 18863 No 12 No
BRISTOL MANOR OF TRENTON 1701 EAST 28TH ST TRENTON Mailing Address 1701 EAST 28TH ST TRENTON  BRISTOL MANOR OF UNIONVILL 715 NORTH 22ND ST, HWY 5 NORTH UNIONVILLE	MO 65078-0807  MO 64683-1177  MO 64683-1177  E I MO 63565-1142	County MORGAN Region 6  Telephone (660) 359-5599 Level of Care: RCF County GRUNDY Region 4  Telephone (660) 947-2151 Level of Care: RCF	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 18863 No 12 No 18597
BRISTOL MANOR OF TRENTON 1701 EAST 28TH ST TRENTON Mailing Address 1701 EAST 28TH ST TRENTON  BRISTOL MANOR OF UNIONVILL 715 NORTH 22ND ST, HWY 5 NORTH UNIONVILLE Mailing Address 715 NORTH 22ND ST	MO 65078-0807  MO 64683-1177  MO 64683-1177  E H MO 63565-1142 T, HWY 5 NORTH	County MORGAN Region 6  Telephone (660) 359-5599 Level of Care: RCF County GRUNDY Region 4  Telephone (660) 947-2151 Level of Care: RCF County PUTNAM	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	No 18863 No 12 No 18597 No 12 No
BRISTOL MANOR OF TRENTON 1701 EAST 28TH ST TRENTON Mailing Address 1701 EAST 28TH ST TRENTON  BRISTOL MANOR OF UNIONVILL 715 NORTH 22ND ST, HWY 5 NORTH UNIONVILLE	MO 65078-0807  MO 64683-1177  MO 64683-1177  E I MO 63565-1142	County MORGAN Region 6  Telephone (660) 359-5599 Level of Care: RCF County GRUNDY Region 4  Telephone (660) 947-2151 Level of Care: RCF	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	No 18863 No 12 No 18597
BRISTOL MANOR OF TRENTON 1701 EAST 28TH ST TRENTON Mailing Address 1701 EAST 28TH ST TRENTON  BRISTOL MANOR OF UNIONVILL 715 NORTH 22ND ST, HWY 5 NORTH UNIONVILLE Mailing Address 715 NORTH 22ND ST UNIONVILLE BRISTOL MANOR OF WARRENSB	MO 65078-0807  MO 64683-1177  MO 64683-1177  E H MO 63565-1142 T, HWY 5 NORTH MO 63565-1142	County MORGAN Region 6  Telephone (660) 359-5599 Level of Care: RCF County GRUNDY Region 4  Telephone (660) 947-2151 Level of Care: RCF County PUTNAM Region 5	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 18863 No 12 No 18597 No 12 No 19153
BRISTOL MANOR OF TRENTON 1701 EAST 28TH ST TRENTON Mailing Address 1701 EAST 28TH ST TRENTON  BRISTOL MANOR OF UNIONVILL 715 NORTH 22ND ST, HWY 5 NORTH UNIONVILLE Mailing Address 715 NORTH 22ND ST UNIONVILLE BRISTOL MANOR OF WARRENSB 603 CREACH	MO 65078-0807  MO 64683-1177  MO 64683-1177  E H MO 63565-1142 T, HWY 5 NORTH MO 63565-1142  URG	County MORGAN Region 6  Telephone (660) 359-5599 Level of Care: RCF County GRUNDY Region 4  Telephone (660) 947-2151 Level of Care: RCF County PUTNAM Region 5  Telephone (660) 747-8319	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 18863 No 12 No 18597 No 12 No 19153
BRISTOL MANOR OF TRENTON 1701 EAST 28TH ST TRENTON Mailing Address 1701 EAST 28TH ST TRENTON  BRISTOL MANOR OF UNIONVILL 715 NORTH 22ND ST, HWY 5 NORTH UNIONVILLE Mailing Address 715 NORTH 22ND ST UNIONVILLE BRISTOL MANOR OF WARRENSB 603 CREACH WARRENSBURG	MO 65078-0807  MO 64683-1177  MO 64683-1177  E H MO 63565-1142 T, HWY 5 NORTH MO 63565-1142	County MORGAN Region 6  Telephone (660) 359-5599 Level of Care: RCF County GRUNDY Region 4  Telephone (660) 947-2151 Level of Care: RCF County PUTNAM Region 5  Telephone (660) 747-8319 Level of Care: RCF	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	No 18863 No 12 No 18597 No 12 No 19153
BRISTOL MANOR OF TRENTON 1701 EAST 28TH ST TRENTON Mailing Address 1701 EAST 28TH ST TRENTON  BRISTOL MANOR OF UNIONVILL 715 NORTH 22ND ST, HWY 5 NORTH UNIONVILLE Mailing Address 715 NORTH 22ND ST UNIONVILLE BRISTOL MANOR OF WARRENSB 603 CREACH	MO 65078-0807  MO 64683-1177  MO 64683-1177  E H MO 63565-1142 T, HWY 5 NORTH MO 63565-1142  URG	County MORGAN Region 6  Telephone (660) 359-5599 Level of Care: RCF County GRUNDY Region 4  Telephone (660) 947-2151 Level of Care: RCF County PUTNAM Region 5  Telephone (660) 747-8319	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 18863 No 12 No 18597 No 12 No 19153

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BRISTOL MANOR OF WARRENTO	)N			
815 WOOLF ROAD		<b>Telephone</b> (636) 456-1437	Alzheimer's Unit No	)
WARRENTON	MO 63383-6184	Level of Care: RCF	Bed Capacity 12	2
Mailing Address 815 WOOLF RD		County WARREN	DMH Licensed No.	Э
WARRENTON	MO 63383-6184	Region 6	Facility Number 19954	4
BRISTOL MANOR OF WARSAW				
1600 ESTATE DR		<b>Telephone</b> (660) 438-7173	Alzheimer's Unit No	2
WARSAW	MO 65355-3061	Level of Care: RCF	Bed Capacity 12	
Mailing Address 1600 ESTATE DR	WO 03333 3001	County BENTON	DMH Licensed No	
WARSAW	MO 65355-3061			
WARSAW	WIO 03333-3001	Region 6	Facility Number 16343	,
BRISTOL MANOR OF WASHINGTO	ON			
100 WEST 12TH ST		<b>Telephone</b> (636) 390-0050	Alzheimer's Unit No	
WASHINGTON	MO 63090-4445	Level of Care: RCF	Bed Capacity 12	2
Mailing Address 100 WEST 12TH ST		County FRANKLIN	DMH Licensed No.	Э
WASHINGTON	MO 63090-4445	Region 6	Facility Number 20138	3
BRISTOL MANOR OF WEBB CITY				
1803 NORTH MAIN, HIGHWAY D		<b>Telephone</b> (417) 673-4231	Alzheimer's Unit No	0
WEBB CITY	MO 64870-1193	Level of Care: RCF	Bed Capacity 12	2
Mailing Address 1803 NORTH MAIN,		County JASPER	DMH Licensed No	
WEBB CITY	MO 64870-1193	Region 1	Facility Number 20537	
WESS CITT	MG 01070 1193	Region 1	racinty raniber 2033	,
	r n			
BRISTOL MANOR OF WENTZVILI	LE	T-1	A II-II	_
840 WEST NORTHVIEW	NO. 62205 1026	<b>Telephone</b> (636) 639-6777	Alzheimer's Unit No	
WENTZVILLE	MO 63385-1036	Level of Care: RCF	Bed Capacity 12	
Mailing Address 840 W NORTHVIEW		County SAINT CHARLES	DMH Licensed No	
WENTZVILLE	MO 63385-1036	Region 5	Facility Number 20397	7
BRISTOL MANOR OF WESTON				
178 WALNUT		<b>Telephone</b> (816) 386-5507	Alzheimer's Unit No	
WESTON	MO 64098-1328	Level of Care: RCF	Bed Capacity 12	2
Mailing Address 178 WALNUT		County PLATTE	DMH Licensed No	Э
WESTON	MO 64098-1328	Region 4	Facility Number 16741	1
BRISTOL MANOR OF WILLARD				
511 WATSON		<b>Telephone</b> (417) 742-0090	Alzheimer's Unit No	)
WILLARD	MO 65781-8314	Level of Care: RCF	Bed Capacity 12	2
Mailing Address 511 WATSON		County GREENE	DMH Licensed No	О
WILLARD	MO 65781-8314	Region 1	Facility Number 20838	3
BROOK CHERITH ASSISTED LIVI	NG			
104 EAST ELM ST		<b>Telephone</b> (660) 277-4439	Alzheimer's Unit No	0
HUNTSVILLE	MO 65259-1111	Level of Care: ALF	Bed Capacity 38	
Mailing Address 104 EAST ELM ST		County RANDOLPH	DMH Licensed Yes	
HUNTSVILLE	MO 65259-1111	Region 5	Facility Number 10918	
1101(1D) ( ILLL	1410 UJ2J7-1111	region 2	10910	,

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BROOKDALE CREVE COEUR				
ONE NEW BALLAS PLACE		<b>Telephone</b> (314) 432-5200	Alzheimer's Unit	No
CREVE COEUR	MO 63146-8700	Level of Care: ALF**	Bed Capacity	46
Mailing Address ONE NEW BALLAS P	LACE	County SAINT LOUIS COUNTY	DMH Licensed	No
CREVE COEUR	MO 63146-8700	Region 7	Facility Number	26178
DROOVED AT ELWESTE CONNEW				
BROOKDALE WEST COUNTY		TELL (626) 527 5700	AT TOTAL TOTAL	<b>V</b>
785 HENRY AVE	MO (2011 272)	Telephone (636) 527-5700	Alzheimer's Unit	Yes
BALLWIN 795 HENDY AVE	MO 63011-2736	Level of Care: ALF**	Bed Capacity	98 N-
Mailing Address 785 HENRY AVE	MO (2011 272)	County SAINT LOUIS COUNTY	DMH Licensed	No
BALLWIN	MO 63011-2736	Region 7	Facility Number	28149
BROOKDALE WORNALL PLACE				
501 WEST 107TH ST		<b>Telephone</b> (816) 941-7777	Alzheimer's Unit	No
KANSAS CITY	MO 64114-5919	Level of Care: ALF**	Bed Capacity	68
Mailing Address 501 WEST 107TH ST		County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64114-5919	Region 3	Facility Number	29304
BROOKE HAVEN HEALTHCARE				
1410 NORTH KENTUCKY AVE		<b>Telephone</b> (417) 256-7975	Alzheimer's Unit	Yes
WEST PLAINS	MO 65775-1822	Level of Care: SNF	Bed Capacity	120
Mailing Address 1410 NORTH KENTU	ICKY AVE	County HOWELL	DMH Licensed	No
WEST PLAINS	MO 65775-1822	Region 2 Medicare/Medicaid	Facility Number	06253
BROOKHAVEN NURSING & REHAB	1			
3405 WEST MT VERNON		<b>Telephone</b> (417) 874-9600	Alzheimer's Unit	No
SPRINGFIELD	MO 65802-5241	Level of Care: SNF	<b>Bed Capacity</b>	90
Mailing Address 3405 WEST MT VERN	ION	County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65802-5241	Region 1 Medicare/Medicaid	Facility Number	09512
BROOKING PARK				
307 SOUTH WOODS MILL RD		<b>Telephone</b> (314) 576-5545	Alzheimer's Unit	No
CHESTERFIELD	MO 63017-3418	Level of Care: SNF	Bed Capacity	97
Mailing Address 307 SOUTH WOODS I	MILL RD	County SAINT LOUIS COUNTY	DMH Licensed	No
CHESTERFIELD	MO 63017-3418	Region 7 Medicare/Medicaid	Facility Number	14661
BROOKING PARK				
307 SOUTH WOODS MILL RD		<b>Telephone</b> (314) 576-5545	Alzheimer's Unit	Yes
CHESTERFIELD	MO 63017-3418	Level of Care: ALF**	Bed Capacity	93
Mailing Address 307 SOUTH WOODS I	MILL RD	County SAINT LOUIS COUNTY	DMH Licensed	No
CHESTERFIELD	MO 63017-3418	Region 7	Facility Number	14661
DDOOKGIDE MANOD DEGIDENWAA	CARELLO			
BROOKSIDE MANOR RESIDENTIAL	L CAKE, LLC	Tolonhous (572) 757 (424	Alahaimart- II	NT.
2434 HIGHWAY H	MO 62640 7022	<b>Telephone</b> (573) 756-6434	Alzheimer's Unit	No 20
FARMINGTON	MO 63640-7033	Level of Care: RCF*	Bed Capacity	20 V
Mailing Address 2434 HIGHWAY H		County SAINT FRANCOIS	DMH Licensed	Yes

**Facility Number** 

20034

MO 63640-7033

FARMINGTON

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BRUNSWICK NURSING & REHAB			
721 W HARRISON ST		<b>Telephone</b> (660) 548-3182	Alzheimer's Unit No
BRUNSWICK	MO 65236-1096	Level of Care: SNF	<b>Bed Capacity</b> 60
Mailing Address 721 W HARRISON ST		County CHARITON	<b>DMH Licensed</b> No
BRUNSWICK	MO 65236-1096	Region 5 Medicare/Medicaid	Facility Number 03123
BUFFALO PRAIRIE CENTER FOR R 631 WEST MAIN ST	REHAB AND HEALTHCARE	T-1-nh (417) 245 5422	Alzheimer's Unit NO
BUFFALO	MO 65622 7406	Telephone (417) 345-5422 Level of Care: SNF	
	MO 65622-7496		
Mailing Address 631 WEST MAIN ST BUFFALO	MO 65622-7496	County DALLAS	
BUFFALO	WO 03022-7490	Region 1 Medicare/Medicaid	Facility Number 16700
BUNGALOWS AT BRANSON MEADO	OWS THE		
5351 GRETNA ROAD	0 vis, 1 iii	<b>Telephone</b> (417) 334-3336	Alzheimer's Unit No
BRANSON	MO 65616-7298	Level of Care: RCF	Bed Capacity 104
Mailing Address 5351 GRETNA RD	140 03010 7270	County TANEY	DMH Licensed No
BRANSON	MO 65616-7298	Region 1	Facility Number 23683
BRITION	1410 03010 7290	Acgion 1	25005
BUNGALOWS AT CHESTERFIELD	VILLAGE, THE		
2410 WEST CHESTERFIELD BLVD	,	<b>Telephone</b> (417) 886-4000	Alzheimer's Unit No
SPRINGFIELD	MO 65807-8631	Level of Care: RCF	<b>Bed Capacity</b> 92
Mailing Address 2410 W CHESTERFIE	LD BLVD	County GREENE	DMH Licensed No
SPRINGFIELD	MO 65807-8631	Region 1	Facility Number 22584
		8	
BUNGALOWS AT NEVADA , THE			
640 EAST HIGHLAND		<b>Telephone</b> (417) 667-3883	Alzheimer's Unit No
NEVADA	MO 64772-1091	Level of Care: RCF	Bed Capacity 37
Mailing Address 640 EAST HIGHLAND	)	County VERNON	DMH Licensed No
NEVADA	MO 64772-1091	Region 1	Facility Number 23732
BUNGALOWS AT SPRINGFIELD EA	ST, THE	T	
3540 EAST CHEROKEE	110	<b>Telephone</b> (417) 889-2222	Alzheimer's Unit No
SPRINGFIELD	MO 65809-2828	Level of Care: RCF	Bed Capacity 67
Mailing Address 3540 EAST CHEROKE		County GREENE	DMH Licensed No
SPRINGFIELD	MO 65809-2828	Region 1	Facility Number 21025
BUNKER RESIDENTIAL HOME			
500 CULLER AVE		<b>Telephone</b> (573) 689-1392	Alzheimer's Unit No
BUNKER	MO 63629-	Level of Care: RCF	Bed Capacity 12
Mailing Address PO BOX 276		County REYNOLDS	DMH Licensed Yes
BUNKER	MO 63629-0276	Region 2	Facility Number 16882
DOMELIA	33027 0270	August 2	2 10002
BURLINGTON CREEK SENIOR LIV	ING,THE		
6311 NORTH COSBY AVENUE		<b>Telephone</b> (816) 527-8504	Alzheimer's Unit Yes
KANSAS CITY	MO 64151-2344	Level of Care: ALF**	Bed Capacity 110
Mailing Address 448 NORTH LASALLI	E DRIVE FLOOR 2	County PLATTE	<b>DMH Licensed</b> No
CHICAGO	MO 60654-4518	Region 4	Facility Number 30198

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BUTLER REHAB AND HEALTHCA	ARE CENTER			
416 SOUTH HIGH ST		<b>Telephone</b> (660) 679-6158	Alzheimer's Unit	No
BUTLER	MO 64730-1827	Level of Care: SNF	<b>Bed Capacity</b>	98
Mailing Address 416 S HIGH ST		County BATES	DMH Licensed	No
BUTLER	MO 64730-1827	Region 3 Medicare/Medicaid	<b>Facility Number</b>	08627
BUTTERFIELD RESIDENTIAL CA	DE CENTED			
1120 NORTH BUTTERFIELD RD	RE CENTER	<b>Telephone</b> (417) 326-5200	Alzheimer's Unit	No
BOLIVAR	MO 65613-1000	Level of Care: RCF	Bed Capacity	24
Mailing Address 1120 N BUTTERFIE		County POLK	DMH Licensed	No
BOLIVAR	MO 65613-1000		Facility Number	
BOLIVAR	WO 03013-1000	Region 1	racinty Number	14436
BUTTERFIELD RESIDENTIAL CA	RE CENTER			
1120 NORTH BUTTERFIELD RD		<b>Telephone</b> (417) 326-5200	Alzheimer's Unit	No
BOLIVAR	MO 65613-1000	Level of Care: RCF*	Bed Capacity	66
Mailing Address 1120 N BUTTERFIE	ELD RD	County POLK	DMH Licensed	No
BOLIVAR	MO 65613-1000	Region 1	Facility Number	14436
BUTTERFLY HAVEN				
11500 CAMPBELL ST		<b>Telephone</b> (816) 941-2836	Alzheimer's Unit	No
KANSAS CITY	MO 64131-3829	Level of Care: RCF	Bed Capacity	12
Mailing Address PO BOX 481578		County JACKSON	DMH Licensed	Yes
KANSAS CITY	MO 64148-1578	Region 3	Facility Number	18207
				10207
CALIFORNIA CARE CENTER				
1106 SOUTH OAK, ROUTE 3		<b>Telephone</b> (573) 796-3127	Alzheimer's Unit	No
CALIFORNIA	MO 65018-1462	Level of Care: SNF	Bed Capacity	60
Mailing Address 1106 SOUTH OAK,		County MONITEAU	DMH Licensed	No
CALIFORNIA	MO 65018-1462	Region 6 Medicare/Medicaid	Facility Number	10437
CAMDENTON WINDSOR ESTATE	S			
2042 N BUSINESS ROUTE 5	~	<b>Telephone</b> (573) 346-5654	Alzheimer's Unit	No
CAMDENTON	MO 65020-2611	Level of Care: SNF	Bed Capacity	82
Mailing Address 2042 N BUSINESS F	ROUTE 5	County CAMDEN	DMH Licensed	No
CAMDENTON	MO 65020-2611	Region 6 Medicare/Medicaid	Facility Number	08688
			·	
CAMELOT NURSING AND REHAB	BILITATION CENTER			
705 GRAND CANYON DRIVE		<b>Telephone</b> (573) 756-8911	Alzheimer's Unit	NO
FARMINGTON	MO 63640-2161	Level of Care: SNF	Bed Capacity	97
Mailing Address 705 GRAND CANYO		County SAINT FRANCOIS	DMH Licensed	No
FARMINGTON	MO 63640-2161	Region 2 Medicare/Medicaid	Facility Number	00978
CAMERON NURSING CENTER				
801 EUCLID AVE		<b>Telephone</b> (816) 632-7254	Alzheimer's Unit	No
CAMERON	MO 64429-2003	Level of Care: SNF	Bed Capacity	120
Mailing Address PO BOX 438		County CLINTON	DMH Licensed	No
CAMERON	MO 64429-0438	Region 4 Medicare/Medicaid	Facility Number	00983

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CAMPBELL HEALTHCARE & SENI	OR LIVING		
17108 US HIGHWAY 62		<b>Telephone</b> (573) 246-2155	Alzheimer's Unit Yes
CAMPBELL	MO 63933-6383	Level of Care: SNF	<b>Bed Capacity</b> 90
Mailing Address 17108 US HWY 62		County DUNKLIN	<b>DMH Licensed</b> No
CAMPBELL	MO 63933-6383	Region 2 Medicare/Medicaid	Facility Number 02820
CAPE ALBEON			
		T-1 (626) 961 2200	Alzheimer's Unit Yes
3300 LAKE BEND DR	MO 62000 2524	<b>Telephone</b> (636) 861-3200	
VALLEY PARK	MO 63088-2524	Level of Care: ALF**	Bed Capacity 100
Mailing Address 3300 LAKE BEND DE		County SAINT LOUIS COUNTY	DMH Licensed No
VALLEY PARK	MO 63088-2524	Region 7	Facility Number 22838
CAPETOWN ASSISTED LIVING			
2857 CAPE LACROIX RD		<b>Telephone</b> (573) 334-4855	Alzheimer's Unit Yes
CAPE GIRARDEAU	MO 63701-8588	Level of Care: ALF**	Bed Capacity 48
			DMH Licensed No
Mailing Address 2857 CAPE LACROIX		·	
CAPE GIRARDEAU	MO 63701-8588	Region 2	Facility Number 23989
CARE NETWORK AT LINDELL			
4336 LINDELL BLVD		<b>Telephone</b> (314) 652-4828	Alzheimer's Unit No
SAINT LOUIS	MO 63108-2702	Level of Care: RCF*	Bed Capacity 20
Mailing Address PO BOX 525		County SAINT LOUIS CITY	DMH Licensed Yes
CUBA	MO 65453-	Region 7	Facility Number 10470
СОВА	WIO 03433-	Region /	racinty Number 10470
CARE NETWORK AT WATERMAN			
5143 WATERMAN BLVD		<b>Telephone</b> (314) 367-5620	Alzheimer's Unit No
SAINT LOUIS	MO 63108-1103	Level of Care: RCF*	Bed Capacity 40
Mailing Address 5143 WATERMAN B	LVD	County SAINT LOUIS CITY	DMH Licensed Yes
SAINT LOUIS	MO 63108-1103	Region 7	Facility Number 02785
CARE NETWORK OF CUBA		T. 1 1 (572) 995 2661	A11
5349 HIGHWAY P	MO (5452 (201	<b>Telephone</b> (573) 885-3661	Alzheimer's Unit No
CUBA	MO 65453-6281	Level of Care: RCF*	Bed Capacity 34
Mailing Address PO BOX 647		County CRAWFORD	DMH Licensed Yes
CUBA	MO 65453-0647	Region 6	Facility Number 17894
CARE NETWORK OF GLADSTONE			
3000 NE 64TH ST		<b>Telephone</b> (816) 454-5130	Alzheimer's Unit No
GLADSTONE	MO 64119-1569	Level of Care: ALF**	Bed Capacity 60
Mailing Address 3000 NE 64TH ST	1.10 01117 1007	County CLAY	DMH Licensed No
	MO 64110 1560	·	
GLADSTONE	MO 64119-1569	Region 4	Facility Number 12510
CARE NETWORK OF PLATTE CITY	Y		
15 WALLINGFORD DR		<b>Telephone</b> (816) 858-2182	Alzheimer's Unit No
PLATTE CITY	MO 64079-9604	Level of Care: RCF*	<b>Bed Capacity</b> 30
Mailing Address 15 WALLINGFORD D	DR .	County PLATTE	<b>DMH Licensed</b> No
PLATTE CITY	MO 64079-9604	Region 4	Facility Number 13182
		~	

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CADE NETWORK OF SOUTH COL	INTERV			
CARE NETWORK OF SOUTH COU 1204 TELEGRAPH RD	ONI I	<b>Telephone</b> (314) 631-2003	Alzheimer's Unit	No
SAINT LOUIS	MO 63125-2528	Level of Care: RCF*	Bed Capacity	38
Mailing Address 1204 TELEGRAPH I		County SAINT LOUIS COUNTY	DMH Licensed	Yes
SAINT LOUIS	MO 63125-2528	Region 7	Facility Number	14409
SAINI LOUIS	WIO 03123-2326	Region 7	racinty Number	14409
CARE NETWORK OF ST ANN				
10441 INTERNATIONAL PLAZA DR		<b>Telephone</b> (314) 423-1254	Alzheimer's Unit	No
SAINT ANN	MO 63074-1805	Level of Care: ALF	Bed Capacity	40
Mailing Address 10441 INTERNATIO		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT ANN	MO 63074-1805	Region 7	Facility Number	21994
SARVI AVIV	WIO 03074-1003	Region /	racinty Number	21994
CARE NETWORK OF TROY				
350 CAP AU GRIS		<b>Telephone</b> (636) 462-4915	Alzheimer's Unit	No
TROY	MO 63379-1761	Level of Care: RCF*	Bed Capacity	23
Mailing Address PO BOX 271		County LINCOLN	DMH Licensed	No
TROY	MO 63379-0271	Region 5	Facility Number	08129
		Region		0012)
CAREGIVERS INN				
1297 FEISE RD		<b>Telephone</b> (636) 240-7979	Alzheimer's Unit	Yes
DARDENNE PRAIRIE	MO 63368-6710	Level of Care: ALF**	Bed Capacity	30
Mailing Address 1297 FEISE RD		County SAINT CHARLES	DMH Licensed	No
DARDENNE PRAIRIE	MO 63368-6710	Region 5	Facility Number	15342
		· ·	•	
CARL JUNCTION RESIDENTIAL O	CARE			
201 FIR RD		<b>Telephone</b> (417) 782-5659	Alzheimer's Unit	No
CARL JUNCTION	MO 64834-9222	Level of Care: RCF*	Bed Capacity	37
Mailing Address 201 FIR RD		County JASPER	DMH Licensed	No
CARL JUNCTION	MO 64834-9222	Region 1	Facility Number	20550
0. D	777 - P. 777			
CARMEL HILLS WELLNESS & RE	LHABILITATION	Tolonhous (016) 461 0600	Alaboin T. M	v
810 EAST WALNUT ST	MO (4050 4005	<b>Telephone</b> (816) 461-9600	Alzheimer's Unit	Yes
INDEPENDENCE	MO 64050-4025	Level of Care: SNF	Bed Capacity DMH Licensed	194
Mailing Address 810 EAST WALNUT INDEPENDENCE	MO 64050-4025	County JACKSON		No
INDEPENDENCE	MO 64030-4023	Region 3 Medicare/Medicaid	Facility Number	23422
CARNEGIE VILLAGE REHABILIT	FATION & HEALTH CARE CENTER,	LLC		
105 BERNARD DRIVE	,	<b>Telephone</b> (816) 348-8815	Alzheimer's Unit	No
BELTON	MO 64012-6181	Level of Care: SNF	Bed Capacity	78
Mailing Address 105 BERNARD DRI		County CASS	DMH Licensed	No
BELTON	MO 64012-6181	Region 3 Medicare/Medicaid	Facility Number	30531
		<u> </u>	•	
CARNEGIE VILLAGE SENIOR LIV	VING COMMUNITY			
103 BERNARD DR		<b>Telephone</b> (816) 322-0844	Alzheimer's Unit	No
BELTON	MO 64012-6182	<b>Level of Care:</b> ALF**	<b>Bed Capacity</b>	85
Mailing Address 103 BERNARD DR		County CASS	DMH Licensed	No
BELTON	MO 64012-6182	Region 3	Facility Number	25482

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CARONDELET RETIREMENT MA	ANOR			
6811 MICHIGAN		<b>Telephone</b> (314) 353-9552	Alzheimer's Unit N	
SAINT LOUIS	MO 63111-2834	Level of Care: RCF*		34
Mailing Address PO BOX 37073		County SAINT LOUIS CITY	DMH Licensed Ye	
SAINT LOUIS	MO 63141-1573	Region 7	Facility Number 0105	8
CARRIAGE RECIDENTIAL CARE	CENTED LLC			
CARRIAGE RESIDENTIAL CARE 508 NORTH WASHINGTON ST	CENTER LLC	<b>Telephone</b> (573) 756-8140	Alzheimer's Unit N	ſo.
FARMINGTON	MO 63640-1756	• '		20
	MO 03040-1730		Bed Capacity 2 DMH Licensed Ye	
Mailing Address PO BOX 272 FARMINGTON	MO 63640-0675			
FARMINGTON	MO 03040-0073	Region 2	Facility Number 0782	.4
CARRIAGE SQUARE REHAB AND	HEALTHCARE CENTER			
4009 GENE FIELD RD		<b>Telephone</b> (816) 364-1526	Alzheimer's Unit N	o
SAINT JOSEPH	MO 64506-1864	Level of Care: SNF	Bed Capacity 13	30
Mailing Address 4009 GENE FIELD 1	RD	County BUCHANAN		lo
SAINT JOSEPH	MO 64506-1864	Region 4 Medicare/Medicaid	Facility Number 0106	51
		5	·	
CARRIAGE SQUARE REHAB AND	HEALTHCARE CENTER			
4009 GENE FIELD RD		<b>Telephone</b> (816) 364-1526	Alzheimer's Unit N	o
SAINT JOSEPH	MO 64506-1864	Level of Care: RCF*	<b>Bed Capacity</b> 3	32
Mailing Address 4009 GENE FIELD I	RD	County BUCHANAN	DMH Licensed N	lo
SAINT JOSEPH	MO 64506-1864	Region 4	Facility Number 0106	51
CARDIE DUMACI ONC TERM CA	DE EACH IEV			
CARRIE DUMAS LONG TERM CA	RE FACILITY	Tolonhous (816) 024 5017	Alabaiman'a Unit	T.o.
2836 BENTON BLVD KANSAS CITY	MO 64128-1140	Telephone (816) 924-5017 Level of Care: ALF	Alzheimer's Unit N Bed Capacity 3	34
Mailing Address 2836 BENTON BLV		County JACKSON	DMH Licensed Ye	
KANSAS CITY	MO 64128-1140	Region 3	Facility Number 1855	
KANSAS CII I	WIO 04128-1140	Region 3	racinty Number 1833	U
CARRIE ELLIGSON GIETNER HO	OME			
5000 SOUTH BROADWAY		<b>Telephone</b> (314) 752-0000	Alzheimer's Unit N	ĺΟ
SAINT LOUIS	MO 63111-2015	Level of Care: SNF	Bed Capacity 13	60
Mailing Address 5000 S BROADWA	Y	County SAINT LOUIS CITY	DMH Licensed N	lo
SAINT LOUIS	MO 63111-2015	Region 7 Medicare/Medicaid	Facility Number 0287	7
CARROLL HOUSE				
CARROLL HOUSE				
307 GRAND		<b>Telephone</b> (660) 542-1599	Alzheimer's Unit N	
CARROLLTON	MO 64633-2265	Level of Care: SNF	· · · · · · · · · · · · · · · · · · ·	53
Mailing Address 307 GRAND	MO 54500 00 57	County CARROLL		lo -
CARROLLTON	MO 64633-2265	Region 4 Medicare/Medicaid	Facility Number 2202	.7
CARTHAGE HEALTH AND REHA	BILITATION CENTER			
1901 BUENA VISTA AVE		<b>Telephone</b> (417) 358-1937	Alzheimer's Unit Ye	es
CARTHAGE	MO 64836-3178	Level of Care: SNF	Bed Capacity 12	20
Mailing Address 1901 BUENA VISTA	A AVE	County JASPER		lo
CARTHAGE	MO 64836-3178	Region 1 Medicare/Medicaid	Facility Number 1247	2

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CASSVILLE HEALTH CENTER FO	OR REHAB AND HEALTHCARE		
1300 COUNTY FARM RD		<b>Telephone</b> (417) 847-3386	Alzheimer's Unit No
CASSVILLE	MO 65625-1726	Level of Care: SNF	<b>Bed Capacity</b> 60
Mailing Address 1300 COUNTY FAR		County BARRY	<b>DMH Licensed</b> No
CASSVILLE	MO 65625-1726	Region 1 Medicare/Medicaid	Facility Number 01097
CASTLEWOOD SENIOR LIVING T	CHE		
1538 N OLD CASTLE ROAD		<b>Telephone</b> (417) 724-8188	Alzheimer's Unit Yes
NIXA	MO 65714-9902	Level of Care: ALF**	<b>Bed Capacity</b> 66
Mailing Address 1538 N OLD CASTL	E ROAD	County CHRISTIAN	DMH Licensed No
NIXA	MO 65714-9902	Region 1	Facility Number 30722
		-148-44	200.22
CEDAR POINTE			
1800 WHITE COLUMNS DR	250 57101 2011	<b>Telephone</b> (573) 364-7766	Alzheimer's Unit Yes
ROLLA	MO 65401-2044	Level of Care: SNF	Bed Capacity 102
Mailing Address 1800 WHITE COLUI		County PHELPS	DMH Licensed No
ROLLA	MO 65401-2044	Region 6 Medicare/Medicaid	Facility Number 06801
CEDAR RIDGE CARE CENTER, LI	LC		
71 SYCAMORE		<b>Telephone</b> (417) 847-5546	Alzheimer's Unit No
CASSVILLE	MO 65625-1755	Level of Care: RCF*	<b>Bed Capacity</b> 30
Mailing Address PO BOX 633		County BARRY	<b>DMH Licensed</b> Yes
CASSVILLE	MO 65625-0633	Region 1	Facility Number 15295
CEDARGATE HEALTHCARE			
2350 KANELL BLVD		<b>Telephone</b> (573) 785-0188	Alzheimer's Unit No
POPLAR BLUFF	MO 63901-4036	Level of Care: SNF	Bed Capacity 108
Mailing Address 2350 KANELL BLV		County BUTLER	DMH Licensed No
POPLAR BLUFF	MO 63901-4036	Region 2 Medicare/Medicaid	Facility Number 01182
		Region - Medical different	01102
CEDARGATE HEALTHCARE		TE 1 1 (570) 705 0100	
2350 KANELL BLVD	MO 63901-4036	Telephone (573) 785-0188 Level of Care: ALF	Alzheimer's Unit No
POPLAR BLUFF			Bed Capacity 16
Mailing Address 2350 KANELL BLVI POPLAR BLUFF		County BUTLER	DMH Licensed No
POPLAR BLUFF	MO 63901-4036	Region 2	Facility Number 01182
CEDARHURST OF ARNOLD			
2069 MISSOURI STATE ROAD		<b>Telephone</b> (636) 333-3004	<b>Alzheimer's Unit</b> Yes
ARNOLD	MO 63010-4809	Level of Care: ALF**	<b>Bed Capacity</b> 94
Mailing Address 2069 MISSOURI ST.	ATE ROAD	<b>County</b> JEFFERSON	<b>DMH Licensed</b> No
ARNOLD	MO 63010-4809	Region 2	Facility Number 32428
CEDARHURST OF BLUE SPRINGS	<b>S</b>		
20551 E TRINITY PLACE		<b>Telephone</b> (816) 685-8863	Alzheimer's Unit Yes
BLUE SPRINGS	MO 64015-9501	Level of Care: ALF**	<b>Bed Capacity</b> 89
Mailing Address 20551 E TRINITY Pl	LACE	County JACKSON	DMH Licensed No
BLUE SPRINGS	MO 64015-9501	Region 3	Facility Number 31581

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CEDARHURST OF COLUMBIA		
2333 CHAPEL HILL RD	Telephone (573) 234-1091 Alzheimer's Unit	Yes
COLUMBIA MO 65203-1537	Level of Care: ALF** Bed Capacity	127
Mailing Address 2333 CHAPEL HILL RD	County BOONE DMH Licensed	No
COLUMBIA MO 65203-1537	Region 6 Facility Number	29874
CEDARHURST OF DES PERES		
12826 DAYLIGHT CIRCLE	Telephone (314) 916-6614 Alzheimer's Unit	Yes
SAINT LOUIS MO 63131-1890	Level of Care: ALF** Bed Capacity	76
Mailing Address 12826 DAYLIGHT CIRCLE	County SAINT LOUIS COUNTY DMH Licensed	No
SAINT LOUIS MO 63131-1890	Region 7 Facility Number	30351
SAINT LOUIS NIO 03131-1090	Region / Facinty Number	30331
CEDARHURST OF FARMINGTON		
200 MAPLE VALLEY DRIVE	Telephone (573) 713-9150 Alzheimer's Unit	Yes
FARMINGTON MO 63640-7331	Level of Care: ALF** Bed Capacity	84
Mailing Address 200 MAPLE VALLEY DRIVE	County SAINT FRANCOIS DMH Licensed	No
FARMINGTON MO 63640-7331	Region 2 Facility Number	32159
CEDARHURST OF LEBANON ASSISTED LIVING & ME	MORY CARE	
842 LYNN STREET	Telephone (417) 815-0122 Alzheimer's Unit	Yes
LEBANON MO 65536-3832		90
Mailing Address 842 LYNN STREET	County LACLEDE DMH Licensed	No
LEBANON MO 65536-3832	Region 1 Facility Number	31890
CEDARHURST OF SPRINGFIELD		
CEDARHURST OF SPRINGFIELD 1146 EAST LAKEWOOD ST	Telephone (417) 885-9050 Alzheimer's Unit	Yes
	Telephone (417) 885-9050 Alzheimer's Unit Level of Care: ALF** Bed Capacity	Yes 66
1146 EAST LAKEWOOD ST	• • • •	
1146 EAST LAKEWOOD ST SPRINGFIELD MO 65810-2614	Level of Care: ALF** Bed Capacity	66
1146 EAST LAKEWOOD ST SPRINGFIELD MO 65810-2614 <b>Mailing Address</b> 1146 E LAKEWOOD ST	Level of Care: ALF** Bed Capacity County GREENE DMH Licensed	66 No
1146 EAST LAKEWOOD ST  SPRINGFIELD MO 65810-2614  Mailing Address 1146 E LAKEWOOD ST  SPRINGFIELD MO 65810-2614	Level of Care: ALF** Bed Capacity County GREENE DMH Licensed Region 1 Facility Number	66 No
1146 EAST LAKEWOOD ST  SPRINGFIELD MO 65810-2614  Mailing Address 1146 E LAKEWOOD ST  SPRINGFIELD MO 65810-2614  CEDARHURST OF ST. CHARLES ASSISTED LIVING &	Level of Care: ALF** Bed Capacity County GREENE DMH Licensed Region 1 Facility Number  MEMORY CARE	66 No 28295
1146 EAST LAKEWOOD ST SPRINGFIELD MO 65810-2614  Mailing Address 1146 E LAKEWOOD ST SPRINGFIELD MO 65810-2614  CEDARHURST OF ST. CHARLES ASSISTED LIVING & 1800 FIRST CAPITOL DRIVE	Level of Care: ALF** County GREENE DMH Licensed Region 1 Facility Number  MEMORY CARE Telephone (636) 255-8094 Alzheimer's Unit	66 No 28295 Yes
1146 EAST LAKEWOOD ST  SPRINGFIELD MO 65810-2614  Mailing Address 1146 E LAKEWOOD ST  SPRINGFIELD MO 65810-2614  CEDARHURST OF ST. CHARLES ASSISTED LIVING & 1800 FIRST CAPITOL DRIVE  SAINT CHARLES MO 63301-1646	Level of Care: ALF**  County GREENE  Region 1  MEMORY CARE  Telephone (636) 255-8094 Level of Care: ALF**  Bed Capacity  DMH Licensed  Facility Number  Alzheimer's Unit  Bed Capacity	66 No 28295 Yes 155
SPRINGFIELD MO 65810-2614  Mailing Address 1146 E LAKEWOOD ST  SPRINGFIELD MO 65810-2614  CEDARHURST OF ST. CHARLES ASSISTED LIVING & 1800 FIRST CAPITOL DRIVE  SAINT CHARLES MO 63301-1646  Mailing Address 1800 FIRST CAPITOL DRIVE	Level of Care: ALF** County GREENE DMH Licensed Region 1 Facility Number  MEMORY CARE  Telephone (636) 255-8094 Level of Care: ALF** Bed Capacity County SAINT CHARLES  DMH Licensed	66 No 28295 Yes 155 No
1146 EAST LAKEWOOD ST  SPRINGFIELD MO 65810-2614  Mailing Address 1146 E LAKEWOOD ST  SPRINGFIELD MO 65810-2614  CEDARHURST OF ST. CHARLES ASSISTED LIVING & 1800 FIRST CAPITOL DRIVE  SAINT CHARLES MO 63301-1646	Level of Care: ALF**  County GREENE  Region 1  MEMORY CARE  Telephone (636) 255-8094 Level of Care: ALF**  Bed Capacity  DMH Licensed  Facility Number  Alzheimer's Unit  Bed Capacity	66 No 28295 Yes 155
SPRINGFIELD MO 65810-2614  Mailing Address 1146 E LAKEWOOD ST  SPRINGFIELD MO 65810-2614  CEDARHURST OF ST. CHARLES ASSISTED LIVING & 1800 FIRST CAPITOL DRIVE  SAINT CHARLES MO 63301-1646  Mailing Address 1800 FIRST CAPITOL DRIVE	Level of Care: ALF** County GREENE DMH Licensed Region 1 Facility Number  MEMORY CARE  Telephone (636) 255-8094 Level of Care: ALF** Bed Capacity County SAINT CHARLES  DMH Licensed	66 No 28295 Yes 155 No
SPRINGFIELD MO 65810-2614  Mailing Address 1146 E LAKEWOOD ST  SPRINGFIELD MO 65810-2614  CEDARHURST OF ST. CHARLES ASSISTED LIVING & 1800 FIRST CAPITOL DRIVE  SAINT CHARLES MO 63301-1646  Mailing Address 1800 FIRST CAPITOL DRIVE	Level of Care: ALF** County GREENE DMH Licensed Region 1 Facility Number  MEMORY CARE  Telephone (636) 255-8094 Level of Care: ALF** Bed Capacity County SAINT CHARLES  DMH Licensed	66 No 28295 Yes 155 No
SPRINGFIELD MO 65810-2614  Mailing Address 1146 E LAKEWOOD ST  SPRINGFIELD MO 65810-2614  CEDARHURST OF ST. CHARLES ASSISTED LIVING & 1800 FIRST CAPITOL DRIVE  SAINT CHARLES MO 63301-1646  Mailing Address 1800 FIRST CAPITOL DRIVE  SAINT CHARLES MO 63301-1646	Level of Care: ALF** County GREENE DMH Licensed Region 1 Facility Number  MEMORY CARE  Telephone (636) 255-8094 Level of Care: ALF** Bed Capacity County SAINT CHARLES  DMH Licensed	66 No 28295 Yes 155 No
SPRINGFIELD MO 65810-2614  Mailing Address 1146 E LAKEWOOD ST  SPRINGFIELD MO 65810-2614  CEDARHURST OF ST. CHARLES ASSISTED LIVING & 1800 FIRST CAPITOL DRIVE  SAINT CHARLES MO 63301-1646  Mailing Address 1800 FIRST CAPITOL DRIVE  SAINT CHARLES MO 63301-1646  CEDARHURST OF TESSON HEIGHTS	Level of Care: ALF** County GREENE DMH Licensed Region 1 Facility Number  MEMORY CARE  Telephone (636) 255-8094 Level of Care: ALF** County SAINT CHARLES Region 5 Facility Number	66 No 28295 Yes 155 No 30676
SPRINGFIELD MO 65810-2614  Mailing Address 1146 E LAKEWOOD ST  SPRINGFIELD MO 65810-2614  CEDARHURST OF ST. CHARLES ASSISTED LIVING & 1800 FIRST CAPITOL DRIVE  SAINT CHARLES MO 63301-1646  Mailing Address 1800 FIRST CAPITOL DRIVE  SAINT CHARLES MO 63301-1646  CEDARHURST OF TESSON HEIGHTS  12335 WEST BEND DR	Level of Care: ALF** County GREENE DMH Licensed Region 1 Facility Number  MEMORY CARE  Telephone (636) 255-8094 Level of Care: ALF** County SAINT CHARLES Region 5 Facility Number  Telephone (314) 849-1366 Alzheimer's Unit	66 No 28295 Yes 155 No 30676
SPRINGFIELD MO 65810-2614  Mailing Address 1146 E LAKEWOOD ST  SPRINGFIELD MO 65810-2614  CEDARHURST OF ST. CHARLES ASSISTED LIVING & 1800 FIRST CAPITOL DRIVE  SAINT CHARLES MO 63301-1646  Mailing Address 1800 FIRST CAPITOL DRIVE  SAINT CHARLES MO 63301-1646  CEDARHURST OF TESSON HEIGHTS  12335 WEST BEND DR  SAINT LOUIS MO 63128-2160	Level of Care: ALF**  County GREENE  Region 1  MEMORY CARE  Telephone (636) 255-8094 Level of Care: ALF**  County SAINT CHARLES Region 5  Telephone (314) 849-1366 Level of Care: ALF**  Bed Capacity  DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity  Alzheimer's Unit Level of Care: ALF**  Bed Capacity	66 No 28295 Yes 155 No 30676
SPRINGFIELD MO 65810-2614  Mailing Address 1146 E LAKEWOOD ST  SPRINGFIELD MO 65810-2614  CEDARHURST OF ST. CHARLES ASSISTED LIVING & 1800 FIRST CAPITOL DRIVE  SAINT CHARLES MO 63301-1646  Mailing Address 1800 FIRST CAPITOL DRIVE  SAINT CHARLES MO 63301-1646  CEDARHURST OF TESSON HEIGHTS  12335 WEST BEND DR  SAINT LOUIS MO 63128-2160  Mailing Address 12335 WEST BEND DR	Level of Care: ALF** County GREENE DMH Licensed Region 1  Telephone (636) 255-8094 Level of Care: ALF** County SAINT CHARLES Region 5  Telephone (314) 849-1366 Level of Care: ALF** Bed Capacity DMH Licensed Facility Number  Telephone (314) 849-1366 Alzheimer's Unit Level of Care: ALF** Bed Capacity DMH Licensed SAINT LOUIS COUNTY DMH Licensed	66 No 28295 Yes 155 No 30676
SPRINGFIELD MO 65810-2614  Mailing Address 1146 E LAKEWOOD ST  SPRINGFIELD MO 65810-2614  CEDARHURST OF ST. CHARLES ASSISTED LIVING & 1800 FIRST CAPITOL DRIVE  SAINT CHARLES MO 63301-1646  Mailing Address 1800 FIRST CAPITOL DRIVE  SAINT CHARLES MO 63301-1646  CEDARHURST OF TESSON HEIGHTS  12335 WEST BEND DR  SAINT LOUIS MO 63128-2160  Mailing Address 12335 WEST BEND DR  SAINT LOUIS MO 63128-2160	Level of Care: ALF** County GREENE DMH Licensed Region 1  Telephone (636) 255-8094 Level of Care: ALF** County SAINT CHARLES Region 5  Telephone (314) 849-1366 Level of Care: ALF** Bed Capacity DMH Licensed Facility Number  Telephone (314) 849-1366 Alzheimer's Unit Level of Care: ALF** Bed Capacity DMH Licensed SAINT LOUIS COUNTY DMH Licensed	66 No 28295 Yes 155 No 30676
SPRINGFIELD MO 65810-2614  Mailing Address 1146 E LAKEWOOD ST  SPRINGFIELD MO 65810-2614  CEDARHURST OF ST. CHARLES ASSISTED LIVING & 1800 FIRST CAPITOL DRIVE  SAINT CHARLES MO 63301-1646  Mailing Address 1800 FIRST CAPITOL DRIVE  SAINT CHARLES MO 63301-1646  CEDARHURST OF TESSON HEIGHTS  12335 WEST BEND DR  SAINT LOUIS MO 63128-2160  Mailing Address 12335 WEST BEND DR  SAINT LOUIS MO 63128-2160  CEDARHURST OF WEST PLAINS	Level of Care: ALF** County GREENE Region 1  MEMORY CARE  Telephone (636) 255-8094 Level of Care: ALF** County SAINT CHARLES Region 5  Telephone (314) 849-1366 Level of Care: ALF** Bed Capacity Number  Telephone (314) 849-1366 Alzheimer's Unit Level of Care: ALF** Bed Capacity Number  Telephone (314) 849-1366 Alzheimer's Unit Level of Care: ALF** Bed Capacity County SAINT LOUIS COUNTY DMH Licensed Region 7	66 No 28295 Yes 155 No 30676 No 79 No 13663
SPRINGFIELD MO 65810-2614  Mailing Address 1146 E LAKEWOOD ST  SPRINGFIELD MO 65810-2614  CEDARHURST OF ST. CHARLES ASSISTED LIVING & 1800 FIRST CAPITOL DRIVE  SAINT CHARLES MO 63301-1646  Mailing Address 1800 FIRST CAPITOL DRIVE  SAINT CHARLES MO 63301-1646  CEDARHURST OF TESSON HEIGHTS  12335 WEST BEND DR  SAINT LOUIS MO 63128-2160  Mailing Address 12335 WEST BEND DR  SAINT LOUIS MO 63128-2160  CEDARHURST OF WEST PLAINS  1521 US HIGHWAY 63	Level of Care: ALF** County GREENE Region 1  Telephone (636) 255-8094 Level of Care: ALF** County SAINT CHARLES Region 5  Telephone (314) 849-1366 Level of Care: ALF** County SAINT LOUIS COUNTY County SAINT LOUIS COUNTY Region 7  Telephone (417) 372-8940  Alzheimer's Unit	66 No 28295 Yes 155 No 30676 No 79 No 13663
SPRINGFIELD MO 65810-2614  Mailing Address 1146 E LAKEWOOD ST  SPRINGFIELD MO 65810-2614  CEDARHURST OF ST. CHARLES ASSISTED LIVING & 1800 FIRST CAPITOL DRIVE  SAINT CHARLES MO 63301-1646  Mailing Address 1800 FIRST CAPITOL DRIVE  SAINT CHARLES MO 63301-1646  CEDARHURST OF TESSON HEIGHTS  12335 WEST BEND DR  SAINT LOUIS MO 63128-2160  Mailing Address 12335 WEST BEND DR  SAINT LOUIS MO 63128-2160  CEDARHURST OF WEST PLAINS  1521 US HIGHWAY 63  WEST PLAINS MO 65775-9809	Level of Care: ALF** County GREENE Region 1  Telephone (636) 255-8094 Level of Care: ALF** County SAINT CHARLES Region 5  Telephone (314) 849-1366 Level of Care: ALF** Bed Capacity DMH Licensed Facility Number  Telephone (314) 849-1366 Alzheimer's Unit Level of Care: ALF** Bed Capacity DMH Licensed Facility Number  Telephone (417) 372-8940 Level of Care: ALF** Bed Capacity	66 No 28295 Yes 155 No 30676 No 79 No 13663
SPRINGFIELD MO 65810-2614  Mailing Address 1146 E LAKEWOOD ST  SPRINGFIELD MO 65810-2614  CEDARHURST OF ST. CHARLES ASSISTED LIVING & 1800 FIRST CAPITOL DRIVE  SAINT CHARLES MO 63301-1646  Mailing Address 1800 FIRST CAPITOL DRIVE  SAINT CHARLES MO 63301-1646  CEDARHURST OF TESSON HEIGHTS  12335 WEST BEND DR  SAINT LOUIS MO 63128-2160  Mailing Address 12335 WEST BEND DR  SAINT LOUIS MO 63128-2160  CEDARHURST OF WEST PLAINS  1521 US HIGHWAY 63	Level of Care: ALF** County GREENE Region 1  Telephone (636) 255-8094 Level of Care: ALF** County SAINT CHARLES Region 5  Telephone (314) 849-1366 Level of Care: ALF** County SAINT LOUIS COUNTY County SAINT LOUIS COUNTY Region 7  Telephone (417) 372-8940  Alzheimer's Unit	66 No 28295 Yes 155 No 30676 No 79 No 13663

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CEDARS OF LIBERTY HEALTH C	ARE CENTER		
200 WEST RUTH EWING RD		<b>Telephone</b> (816) 781-7600	Alzheimer's Unit No
LIBERTY	MO 64068-9496	Level of Care: RCF	<b>Bed Capacity</b> 206
Mailing Address 200 WEST RUTH EV	WING RD	County CLAY	<b>DMH Licensed</b> Yes
LIBERTY	MO 64068-9496	Region 4	Facility Number 13854
CENTRAL GARDENS INC			
302 NORTH ELM ST		<b>Telephone</b> (573) 624-0011	Alzheimer's Unit No
DEXTER	MO 63841-1773	Level of Care: RCF*	Bed Capacity 83
Mailing Address 302 NORTH ELM ST			DMH Licensed No
DEXTER	MO 63841-1773		
DEATER	MO 03641-17/3	Region 2	Facility Number 18858
CENTURY PINES ASSISTED LIVIN	NG		
709 EAST MCCRACKEN RD		<b>Telephone</b> (417) 581-7278	Alzheimer's Unit No
OZARK	MO 65721-9499	Level of Care: ALF	Bed Capacity 80
Mailing Address 709 EAST MCCRAC		County CHRISTIAN	<b>DMH Licensed</b> Yes
OZARK	MO 65721-9499	Region 1	Facility Number 01200
CENTURY PINES ASSISTED LIVIN	NG		
709 EAST MCCRACKEN RD		<b>Telephone</b> (417) 581-7278	Alzheimer's Unit No
OZARK	MO 65721-9499	Level of Care: ALF**	<b>Bed Capacity</b> 23
Mailing Address 709 EAST MCCRAC	CKEN RD	County CHRISTIAN	<b>DMH Licensed</b> No
OZARK	MO 65721-9499	Region 1	Facility Number 01200
CHAFFEE NURSING CENTER			
12273 STATE HIGHWAY 77		<b>Telephone</b> (573) 887-3615	Alzheimer's Unit No
CHAFFEE	MO 63740-8219	Level of Care: SNF	Bed Capacity 71
Mailing Address 12273 STATE HIGH	WAY 77	County SCOTT	DMH Licensed No
CHAFFEE	MO 63740-8219	Region 2 Medicare/Medicaid	Facility Number 13652
CHARITON PARK HEALTH CARE	CENTER		
902 MANOR DR		<b>Telephone</b> (660) 388-6486	Alzheimer's Unit No
SALISBURY	MO 65281-1236	Level of Care: SNF	Bed Capacity 120
Mailing Address 902 MANOR DR		County CHARITON	DMH Licensed No
SALISBURY	MO 65281-1236	Region 5 Medicare/Medicaid	Facility Number 06469
CHATEAU ANN MARIE			
7700 MINNESOTA AVE		<b>Telephone</b> (314) 449-1497	Alzheimer's Unit No
SAINT LOUIS	MO 63111-3336	Level of Care: ALF	Bed Capacity 22
Mailing Address 7700 MINNESOTA	AVE	County SAINT LOUIS CITY	DMH Licensed Yes
SAINT LOUIS	MO 63111-3336	Region 7	Facility Number 14711
		· <del>g</del>	- V <del></del>
CHATEAU GIRARDEAU			
3120 INDEPENDENCE ST		<b>Telephone</b> (573) 335-1281	Alzheimer's Unit No
CAPE GIRARDEAU	MO 63703-5043	Level of Care: ALF**	<b>Bed Capacity</b> 62
Mailing Address 3120 INDEPENDEN		County CAPE GIRARDEAU	DMH Licensed No
CAPE GIRARDEAU	MO 63703-5043	Region 2	Facility Number 01386
<del></del>		8	31300

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CHATEAU GIRARDEAU					
3120 INDEPENDENCE ST	Tel	lephone (5	73) 335-1281	Alzheimer's Unit	No
CAPE GIRARDEAU MO 63	3703-5043 Lev	vel of Care: Sl	NF	Bed Capacity	75
Mailing Address 3120 INDEPENDENCE ST	Con	ounty CAPE	GIRARDEAU	DMH Licensed	No
CAPE GIRARDEAU MO 63	3703-5043 <b>Reg</b>	gion 2 Med	licare/Medicaid	Facility Number	01386
CHEROKEE RESIDENTIAL CARE ACQUIS	ITION LLC				
3409 MISSOURI AVE		lephone (3	14) 771-8360	Alzheimer's Unit	No
		_	*	Bed Capacity	34
Mailing Address 3409 MISSOURI AVE				DMH Licensed	Yes
9		gion 7		Facility Number	14047
CHESTERFIELD VILLAS 14901 N OUTER 40 RD	Tol	lanhana (6	(26) 522 0206	Alzheimer's Unit	No
		•	,	Bed Capacity	No 54
				DMH Licensed	No
Mailing Address 14901 N OUTER 40 RD CHESTERFIELD MO 63		•			
CHESTERFIELD MO 0.	3017-0034 <b>Re</b> g	gion 7		Facility Number	29067
CHESTNUT GLENN - ASSISTED LIVING BY	Y AMERICARE				
121 KLONDIKE CROSSING	Tel	lephone (6	536) 928-4200	Alzheimer's Unit	Yes
SAINT PETERS MO 63	3376-5394 <b>Lev</b>	vel of Care: A	LF**	Bed Capacity	74
Mailing Address 121 KLONDIKE CROSSING	Cor	ounty SAINT	CHARLES	DMH Licensed	No
SAINT PETERS MO 63	3376-5394 <b>Reg</b>	gion 5		Facility Number	25446
CHESTNUT REHAB AND NURSING					
10954 KENNERLY RD		•	<i>'</i>	Alzheimer's Unit	No
				Bed Capacity	167
Mailing Address 10954 KENNERLY RD		•		DMH Licensed	No
SAINT LOUIS MO 63	3128-2018 Reg	gion 7 Med	licare/Medicaid	Facility Number	03182
CHILLICOTHE MANOR I LLC					
1301 MONROE ST	Tel	lephone (6	660) 646-5180	Alzheimer's Unit	No
CHILLICOTHE MO 64	4601-1345 <b>Lev</b>	vel of Care: R	CF*	Bed Capacity	64
Mailing Address 1301 MONROE ST	Cor	ounty LIVING	GSTON	DMH Licensed	Yes
CHILLICOTHE MO 64	4601-1345 Reg	gion 4		Facility Number	04632
CHDICTIAN EVTENDED CARE & REITARI	TTATION				
CHRISTIAN EXTENDED CARE & REHABII		11 (2	14) 255 9010	A 1-1:	No
11160 VILLAGE NORTH DR SAINT LOUIS MO 63		•	*	Alzheimer's Unit	No 60
				Bed Capacity	
Mailing Address 11160 VILLAGE NORTH DR		•		DMH Licensed Facility Number	No
SAINT LOUIS MO 63	3136-6159 <b>Re</b> ş	gion 7 Med	licare/Medicaid	racinty Number	08300
CHURCHILL TERRACE - ASSISTED LIVIN	G BY AMERICARE				
120 HOSPITAL DR	Tel	lephone (5	73) 642-5222	Alzheimer's Unit	No
FULTON MO 65	5251-2511 Lev	vel of Care: A	LF**	Bed Capacity	57
Mailing Address 120 HOSPITAL DR	Con	ounty CALLA		DMH Licensed	No
FULTON MO 65	5251-2511 Reg	gion 6		Facility Number	20783

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CITIZENS MEMORIAL HEALTH CA	ARE FACILITY		
1218 W LOCUST ST		<b>Telephone</b> (417) 326-7648	Alzheimer's Unit No
BOLIVAR	MO 65613-1312	Level of Care: SNF	Bed Capacity 111
Mailing Address PO BOX 590		County POLK	<b>DMH Licensed</b> No
BOLIVAR	MO 65613-0590	Region 1 Medicare/Medicaid	Facility Number 00710
CLARA MANOR NURSING HOME			
3621 WARWICK BLVD		<b>Telephone</b> (816) 756-1593	Alzheimer's Unit No
KANSAS CITY	MO 64111-1403	Level of Care: SNF	Bed Capacity 90
Mailing Address 3621 WARWICK BLV		County JACKSON	DMH Licensed No
KANSAS CITY	MO 64111-1403	Region 3 Medicaid	Facility Number 14102
MANUAL CITT	MO 04111 1403	Region 5 Medicaid	racinty (value)
CLARENCE CARE CENTER			
111 EAST ST		<b>Telephone</b> (660) 699-2118	Alzheimer's Unit No
CLARENCE	MO 63437-1902	Level of Care: SNF	<b>Bed Capacity</b> 60
Mailing Address 111 EAST ST		County SHELBY	DMH Licensed No
CLARENCE	MO 63437-1902	Region 5 Medicare/Medicaid	Facility Number 01475
CLARENDALE CLAYTON			
		The second secon	A11
7651 CLAYTON ROAD	MO 62117 1410	<b>Telephone</b> (314) 390-9399	Alzheimer's Unit Yes Bed Capacity 98
CLAYTON 7651 CLAYTON BOA	MO 63117-1419	Level of Care: ALF**	
Mailing Address 7651 CLAYTON ROA		County SAINT LOUIS COUNTY	DMH Licensed No
CLAYTON	MO 63117-1419	Region 7	Facility Number 32528
CLARENDALE OF ST PETERS			
10 DUBRAY DRIVE		<b>Telephone</b> (636)706-5100	Alzheimer's Unit yes
SAINT PETERS	MO 63376-3558	Level of Care: ALF**	Bed Capacity 110
Mailing Address 10 DUBRAY DRIVE		County SAINT CHARLES	DMH Licensed No
SAINT PETERS	MO 63376-3558	Region 5	Facility Number 32095
CLARK CARE CENTER - ONE			
1505 EAST ASHLAND ST		<b>Telephone</b> (417) 667-3900	Alzheimer's Unit No
NEVADA	MO 64772-4025	Level of Care: RCF*	Bed Capacity 38
Mailing Address PO BOX 246	1410 04772-4023	County VERNON	DMH Licensed Yes
NEVADA	MO 64772-0246	Region 1	Facility Number 20206
NEVADA	110 04772 0240	Region 1	Taciney (value)
CLARK COUNTY NURSING HOME			
1260 N JOHNSON ST		<b>Telephone</b> (660) 727-3303	Alzheimer's Unit No
KAHOKA	MO 63445-1100	Level of Care: RCF*	<b>Bed Capacity</b> 22
Mailing Address 1260 N JOHNSON ST		County CLARK	<b>DMH Licensed</b> No
KAHOKA	MO 63445-1100	Region 5	Facility Number 01480
CLARK COUNTY NURSING HOME			
1260 N JOHNSON ST		<b>Telephone</b> (660) 727-3303	Alzheimer's Unit No
KAHOKA	MO 63445-1100	Level of Care: SNF	Bed Capacity 103
Mailing Address 1260 N JOHNSON ST		County CLARK	DMH Licensed No
KAHOKA	MO 63445-1100	Region 5 Medicare/Medicaid	Facility Number 01480

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CLARK'S MOUNTAIN NURSING C	ENTER			
2100 BARNES		<b>Telephone</b> (573) 223-4297	Alzheimer's Unit	No
PIEDMONT	MO 63957-1008	Level of Care: SNF	Bed Capacity	91
Mailing Address 2100 BARNES	110 03/37 1000	County WAYNE	DMH Licensed	No
PIEDMONT	MO 63957-1008	Region 2 Medicare/Medicaid	Facility Number	01496
TEDMONT	MO 03937-1006	kegion 2 Medicare/Medicaid	racinty Number	01490
CLARU DEVILLE NURSING CENT	ER			
105 SPRUCE ST		<b>Telephone</b> (573) 783-3993	Alzheimer's Unit	Yes
FREDERICKTOWN	MO 63645-1002	Level of Care: SNF	Bed Capacity	90
Mailing Address 105 SPRUCE ST		County MADISON	DMH Licensed	No
FREDERICKTOWN	MO 63645-1002	Region 2 Medicare/Medicaid	Facility Number	17527
CLEARVIEW NURSING CENTER				
430 SALCEDO ROAD		<b>Telephone</b> (573) 471-2565	Alzheimer's Unit	No
SIKESTON	MO 63801-4802	Level of Care: SNF	Bed Capacity	98
Mailing Address PO BOX 707	1410 03001 4002	County SCOTT	DMH Licensed	No
SIKESTON	MO 63801-0707	•	Facility Number	
SIRESTON	WIO 03601-0707	Region 2 Medicare/Medicaid	Facinty Number	19913
CLINTON HEALTHCARE AND RE	HABILITATION CENTER			
1009 EAST OHIO		<b>Telephone</b> (660) 885-5571	Alzheimer's Unit	No
CLINTON	MO 64735-2455	Level of Care: SNF	Bed Capacity	120
Mailing Address 1009 EAST OHIO		County HENRY	DMH Licensed	No
CLINTON	MO 64735-2455	Region 1 Medicare/Medicaid	Facility Number	01318
		redical of redical		01010
COATES STREET COMFORT HOU	ICIE			
	OSE.			
612 WEST COATES ST		<b>Telephone</b> (660) 263-6759	Alzheimer's Unit	No
612 WEST COATES ST MOBERLY	MO 65270-1319	Level of Care: RCF	Bed Capacity	20
612 WEST COATES ST MOBERLY <b>Mailing Address</b> PO BOX 781	MO 65270-1319	Level of Care: RCF County RANDOLPH	Bed Capacity DMH Licensed	
612 WEST COATES ST MOBERLY		Level of Care: RCF	Bed Capacity	20
612 WEST COATES ST MOBERLY <b>Mailing Address</b> PO BOX 781	MO 65270-1319	Level of Care: RCF County RANDOLPH	Bed Capacity DMH Licensed	20 Yes
612 WEST COATES ST MOBERLY <b>Mailing Address</b> PO BOX 781 MOBERLY	MO 65270-1319	Level of Care: RCF County RANDOLPH	Bed Capacity DMH Licensed	20 Yes
612 WEST COATES ST MOBERLY Mailing Address PO BOX 781 MOBERLY  COLLIER CARE HOME, INC 3001 NW VESPER ST	MO 65270-1319 MO 65270-0781	Level of Care: RCF County RANDOLPH Region 5  Telephone (816) 225-9317	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	20 Yes 08220 No
612 WEST COATES ST MOBERLY Mailing Address PO BOX 781 MOBERLY  COLLIER CARE HOME, INC 3001 NW VESPER ST BLUE SPRINGS	MO 65270-1319 MO 65270-0781 MO 64015-3104	Level of Care: RCF County RANDOLPH Region 5  Telephone (816) 225-9317 Level of Care: RCF*	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	20 Yes 08220 No 15
612 WEST COATES ST MOBERLY Mailing Address PO BOX 781 MOBERLY  COLLIER CARE HOME, INC 3001 NW VESPER ST BLUE SPRINGS Mailing Address 3001 NW VESPER S	MO 65270-1319  MO 65270-0781  MO 64015-3104 T	Level of Care: RCF County RANDOLPH Region 5  Telephone (816) 225-9317 Level of Care: RCF* County JACKSON	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	20 Yes 08220 No 15 Yes
612 WEST COATES ST MOBERLY Mailing Address PO BOX 781 MOBERLY  COLLIER CARE HOME, INC 3001 NW VESPER ST BLUE SPRINGS	MO 65270-1319 MO 65270-0781 MO 64015-3104	Level of Care: RCF County RANDOLPH Region 5  Telephone (816) 225-9317 Level of Care: RCF*	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	20 Yes 08220 No 15
612 WEST COATES ST MOBERLY Mailing Address PO BOX 781 MOBERLY  COLLIER CARE HOME, INC 3001 NW VESPER ST BLUE SPRINGS Mailing Address 3001 NW VESPER S	MO 65270-1319  MO 65270-0781  MO 64015-3104 T	Level of Care: RCF County RANDOLPH Region 5  Telephone (816) 225-9317 Level of Care: RCF* County JACKSON	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	20 Yes 08220 No 15 Yes
612 WEST COATES ST MOBERLY Mailing Address PO BOX 781 MOBERLY  COLLIER CARE HOME, INC 3001 NW VESPER ST BLUE SPRINGS Mailing Address 3001 NW VESPER S BLUE SPRINGS	MO 65270-1319  MO 65270-0781  MO 64015-3104 T	Level of Care: RCF County RANDOLPH Region 5  Telephone (816) 225-9317 Level of Care: RCF* County JACKSON	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	20 Yes 08220 No 15 Yes
612 WEST COATES ST MOBERLY Mailing Address PO BOX 781 MOBERLY  COLLIER CARE HOME, INC 3001 NW VESPER ST BLUE SPRINGS Mailing Address 3001 NW VESPER S BLUE SPRINGS  COLLINS HOUSE, THE	MO 65270-1319  MO 65270-0781  MO 64015-3104 T	Level of Care: RCF County RANDOLPH Region 5  Telephone (816) 225-9317 Level of Care: RCF* County JACKSON Region 3	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	20 Yes 08220 No 15 Yes 01591
612 WEST COATES ST MOBERLY Mailing Address PO BOX 781 MOBERLY  COLLIER CARE HOME, INC 3001 NW VESPER ST BLUE SPRINGS Mailing Address 3001 NW VESPER S BLUE SPRINGS  COLLINS HOUSE, THE 102 COLLINS RD	MO 65270-1319  MO 65270-0781  MO 64015-3104  T  MO 64015-3104	Level of Care: RCF County RANDOLPH Region 5  Telephone (816) 225-9317 Level of Care: RCF* County JACKSON Region 3  Telephone (314) 749-0986	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	20 Yes 08220 No 15 Yes 01591
612 WEST COATES ST MOBERLY Mailing Address PO BOX 781 MOBERLY  COLLIER CARE HOME, INC 3001 NW VESPER ST BLUE SPRINGS Mailing Address 3001 NW VESPER S BLUE SPRINGS  COLLINS HOUSE, THE 102 COLLINS RD FESTUS	MO 65270-1319  MO 65270-0781  MO 64015-3104  T  MO 64015-3104	Level of Care: RCF County RANDOLPH Region 5  Telephone (816) 225-9317 Level of Care: RCF* County JACKSON Region 3  Telephone (314) 749-0986 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	20 Yes 08220 No 15 Yes 01591
612 WEST COATES ST MOBERLY Mailing Address PO BOX 781 MOBERLY  COLLIER CARE HOME, INC 3001 NW VESPER ST BLUE SPRINGS Mailing Address 3001 NW VESPER S BLUE SPRINGS  COLLINS HOUSE, THE 102 COLLINS RD FESTUS Mailing Address 102 COLLINS RD FESTUS	MO 65270-1319  MO 65270-0781  MO 64015-3104  T  MO 64015-3104  MO 63028-	Level of Care: RCF County RANDOLPH Region 5  Telephone (816) 225-9317 Level of Care: RCF* County JACKSON Region 3  Telephone (314) 749-0986 Level of Care: ALF** County JEFFERSON	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	20 Yes 08220 No 15 Yes 01591 NO 8 No
612 WEST COATES ST MOBERLY Mailing Address PO BOX 781 MOBERLY  COLLIER CARE HOME, INC 3001 NW VESPER ST BLUE SPRINGS Mailing Address 3001 NW VESPER S BLUE SPRINGS  COLLINS HOUSE, THE 102 COLLINS RD FESTUS Mailing Address 102 COLLINS RD FESTUS COLONIAL HOME, THE	MO 65270-1319  MO 65270-0781  MO 64015-3104  T  MO 64015-3104  MO 63028-	Level of Care: RCF County RANDOLPH Region 5  Telephone (816) 225-9317 Level of Care: RCF* County JACKSON Region 3  Telephone (314) 749-0986 Level of Care: ALF** County JEFFERSON Region 2	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	20 Yes 08220 No 15 Yes 01591 NO 8 No 33443
612 WEST COATES ST MOBERLY Mailing Address PO BOX 781 MOBERLY  COLLIER CARE HOME, INC 3001 NW VESPER ST BLUE SPRINGS Mailing Address 3001 NW VESPER S BLUE SPRINGS  COLLINS HOUSE, THE 102 COLLINS RD FESTUS Mailing Address 102 COLLINS RD FESTUS  COLONIAL HOME, THE 102 SUMMIT ST	MO 65270-1319  MO 65270-0781  MO 64015-3104  T  MO 64015-3104  MO 63028-  MO 63028-	Level of Care: RCF County RANDOLPH Region 5  Telephone (816) 225-9317 Level of Care: RCF* County JACKSON Region 3  Telephone (314) 749-0986 Level of Care: ALF** County JEFFERSON Region 2  Telephone (573) 996-4283	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	20 Yes 08220 No 15 Yes 01591 NO 8 No 33443
612 WEST COATES ST MOBERLY Mailing Address PO BOX 781 MOBERLY  COLLIER CARE HOME, INC 3001 NW VESPER ST BLUE SPRINGS Mailing Address 3001 NW VESPER S BLUE SPRINGS  COLLINS HOUSE, THE 102 COLLINS RD FESTUS Mailing Address 102 COLLINS RD FESTUS  COLONIAL HOME, THE 102 SUMMIT ST DONIPHAN	MO 65270-1319  MO 65270-0781  MO 64015-3104  T  MO 64015-3104  MO 63028-	Level of Care: RCF County RANDOLPH Region 5  Telephone (816) 225-9317 Level of Care: RCF* County JACKSON Region 3  Telephone (314) 749-0986 Level of Care: ALF** County JEFFERSON Region 2  Telephone (573) 996-4283 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	20 Yes 08220 No 15 Yes 01591 NO 8 No 33443
612 WEST COATES ST MOBERLY Mailing Address PO BOX 781 MOBERLY  COLLIER CARE HOME, INC 3001 NW VESPER ST BLUE SPRINGS Mailing Address 3001 NW VESPER S BLUE SPRINGS  COLLINS HOUSE, THE 102 COLLINS RD FESTUS Mailing Address 102 COLLINS RD FESTUS  COLONIAL HOME, THE 102 SUMMIT ST	MO 65270-1319  MO 65270-0781  MO 64015-3104  T  MO 64015-3104  MO 63028-  MO 63028-	Level of Care: RCF County RANDOLPH Region 5  Telephone (816) 225-9317 Level of Care: RCF* County JACKSON Region 3  Telephone (314) 749-0986 Level of Care: ALF** County JEFFERSON Region 2  Telephone (573) 996-4283	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	20 Yes 08220 No 15 Yes 01591 NO 8 No 33443

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COLONIAL HOUSE OF FESTUS II 129 GRAY ST		<b>Telephone</b> (636) 465-0994	Alzheimer's Unit	No
FESTUS	MO 63028-1950	Level of Care: RCF	Bed Capacity	20
Mailing Address 129 GRAY ST	1410 03028-1730	County JEFFERSON	DMH Licensed	No
FESTUS	MO 63028-1950	Region 2	Facility Number	07322
120100	3.44 00020 1700	Region 2	Tuesday Tvalliser	0,322
COLONIAL MANOR, LLC				
907 WEST MALONE ST		<b>Telephone</b> (573) 471-5541	Alzheimer's Unit	No
SIKESTON	MO 63801-2425	Level of Care: ALF	Bed Capacity	20
Mailing Address 907 WEST MALON	E ST	County SCOTT	DMH Licensed	Yes
SIKESTON	MO 63801-2425	Region 2	Facility Number	13255
COLONIAL RESIDENTIAL CARE	EACH ITV II			
1162 CEDAR ST	FACILITY II	<b>Telephone</b> (573) 734-2846	Alzheimer's Unit	No
BISMARCK	MO 63624-8920	Level of Care: RCF*	Bed Capacity	48
Mailing Address PO BOX 134	110 03021 0720	County SAINT FRANCOIS	DMH Licensed	Yes
MOUNTAIN GROVE	MO 65711-0134	Region 2	Facility Number	01693
		<b>g</b>	·	
COLONIAL SPRINGS HEALTHCA	RE CENTER			
750 W COOPER ST		<b>Telephone</b> (417) 345-2228	Alzheimer's Unit	Yes
BUFFALO	MO 65622-8662	Level of Care: SNF	Bed Capacity	134
Mailing Address PO BOX 978		County DALLAS	DMH Licensed	No
BUFFALO	MO 65622-0978	Region 1 Medicare/Medicaid	Facility Number	01302
COLONY POINTE-ASSISTED LIVE	ING BY AMERICARE			
1510 CHAPEL HILL RD				
1310 CILLI EE THEE RD		<b>Telephone</b> (573) 234-1193	Alzheimer's Unit	Yes
COLUMBIA	MO 65203-5457	Telephone (573) 234-1193 Level of Care: ALF**	Alzheimer's Unit Bed Capacity	Yes 59
		- · · · · · · · · · · · · · · · · · · ·		
COLUMBIA		Level of Care: ALF**	Bed Capacity	59
COLUMBIA  Mailing Address 1510 CHAPEL HILL  COLUMBIA	ARD MO 65203-5457	Level of Care: ALF** County BOONE	Bed Capacity DMH Licensed	59 No
COLUMBIA  Mailing Address 1510 CHAPEL HILL  COLUMBIA  COLUMBIA MANOR HEALTH & I	ARD MO 65203-5457	Level of Care: ALF** County BOONE Region 6	Bed Capacity DMH Licensed Facility Number	59 No 28191
COLUMBIA  Mailing Address 1510 CHAPEL HILL  COLUMBIA  COLUMBIA MANOR HEALTH & 1  2012 E. NIFONG BLVD	MO 65203-5457  REHABILITATION	Level of Care: ALF** County BOONE Region 6  Telephone (573) 449-1246	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	59 No 28191 No
COLUMBIA  Mailing Address 1510 CHAPEL HILL  COLUMBIA  COLUMBIA MANOR HEALTH & 1  2012 E. NIFONG BLVD  COLUMBIA	MO 65203-5457  REHABILITATION  MO 65201-3874	Level of Care: ALF** County BOONE Region 6  Telephone (573) 449-1246 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	59 No 28191 No 52
COLUMBIA  Mailing Address 1510 CHAPEL HILL  COLUMBIA  COLUMBIA MANOR HEALTH & 1  2012 E. NIFONG BLVD	MO 65203-5457  REHABILITATION  MO 65201-3874	Level of Care: ALF** County BOONE Region 6  Telephone (573) 449-1246 Level of Care: SNF County BOONE	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	59 No 28191 No
COLUMBIA  Mailing Address 1510 CHAPEL HILL  COLUMBIA  COLUMBIA MANOR HEALTH & I  2012 E. NIFONG BLVD  COLUMBIA  Mailing Address 2012 E. NIFONG BI	MO 65203-5457  REHABILITATION  MO 65201-3874	Level of Care: ALF** County BOONE Region 6  Telephone (573) 449-1246 Level of Care: SNF County BOONE	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	59 No 28191 No 52 No
COLUMBIA  Mailing Address 1510 CHAPEL HILL  COLUMBIA  COLUMBIA MANOR HEALTH & I  2012 E. NIFONG BLVD  COLUMBIA  Mailing Address 2012 E. NIFONG BI	MO 65203-5457  REHABILITATION  MO 65201-3874	Level of Care: ALF** County BOONE Region 6  Telephone (573) 449-1246 Level of Care: SNF County BOONE	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	59 No 28191 No 52 No
COLUMBIA Mailing Address 1510 CHAPEL HILL COLUMBIA  COLUMBIA MANOR HEALTH & D 2012 E. NIFONG BLVD COLUMBIA Mailing Address 2012 E. NIFONG BL COLUMBIA  COLUMBIA COLUMBIA POST ACUTE 3535 BERRYWOOD DRIVE	MO 65203-5457  REHABILITATION  MO 65201-3874  LVD  MO 65201-3874	Level of Care: ALF** County BOONE Region 6  Telephone (573) 449-1246 Level of Care: SNF County BOONE Region 6 Medicare/Medicaid  Telephone (573) 397-7144	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	59 No 28191 No 52 No 01715
COLUMBIA Mailing Address 1510 CHAPEL HILL COLUMBIA  COLUMBIA MANOR HEALTH & 1 2012 E. NIFONG BLVD COLUMBIA Mailing Address 2012 E. NIFONG BL COLUMBIA  COLUMBIA COLUMBIA POST ACUTE 3535 BERRYWOOD DRIVE COLUMBIA	MO 65203-5457  REHABILITATION  MO 65201-3874  VD  MO 65201-3874  MO 65201-6584	Level of Care: ALF** County BOONE Region 6  Telephone (573) 449-1246 Level of Care: SNF County BOONE Region 6 Medicare/Medicaid  Telephone (573) 397-7144 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	59 No 28191 No 52 No 01715
COLUMBIA Mailing Address 1510 CHAPEL HILL COLUMBIA  COLUMBIA MANOR HEALTH & 1 2012 E. NIFONG BLVD COLUMBIA Mailing Address 2012 E. NIFONG BL COLUMBIA  COLUMBIA POST ACUTE 3535 BERRYWOOD DRIVE COLUMBIA Mailing Address 3535 BERRYWOOD	MO 65201-3874 MO 65201-3874 MO 65201-3874 MO 65201-3884 D DRIVE	Level of Care: ALF** County BOONE Region 6  Telephone (573) 449-1246 Level of Care: SNF County BOONE Region 6 Medicare/Medicaid  Telephone (573) 397-7144 Level of Care: SNF County BOONE	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	59 No 28191 No 52 No 01715
COLUMBIA Mailing Address 1510 CHAPEL HILL COLUMBIA  COLUMBIA MANOR HEALTH & 1 2012 E. NIFONG BLVD COLUMBIA Mailing Address 2012 E. NIFONG BL COLUMBIA  COLUMBIA COLUMBIA POST ACUTE 3535 BERRYWOOD DRIVE COLUMBIA	MO 65203-5457  REHABILITATION  MO 65201-3874  VD  MO 65201-3874  MO 65201-6584	Level of Care: ALF** County BOONE Region 6  Telephone (573) 449-1246 Level of Care: SNF County BOONE Region 6 Medicare/Medicaid  Telephone (573) 397-7144 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	59 No 28191 No 52 No 01715
COLUMBIA Mailing Address 1510 CHAPEL HILL COLUMBIA  COLUMBIA MANOR HEALTH & 1 2012 E. NIFONG BLVD COLUMBIA Mailing Address 2012 E. NIFONG BL COLUMBIA  COLUMBIA POST ACUTE 3535 BERRYWOOD DRIVE COLUMBIA Mailing Address 3535 BERRYWOOD	MO 65201-3874 MO 65201-3874 WD MO 65201-3874 MO 65201-6584 D DRIVE MO 65201-6584	Level of Care: ALF** County BOONE Region 6  Telephone (573) 449-1246 Level of Care: SNF County BOONE Region 6 Medicare/Medicaid  Telephone (573) 397-7144 Level of Care: SNF County BOONE	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	59 No 28191 No 52 No 01715
COLUMBIA Mailing Address 1510 CHAPEL HILL COLUMBIA  COLUMBIA MANOR HEALTH & 1 2012 E. NIFONG BLVD COLUMBIA Mailing Address 2012 E. NIFONG BL COLUMBIA  COLUMBIA POST ACUTE 3535 BERRYWOOD DRIVE COLUMBIA Mailing Address 3535 BERRYWOOD COLUMBIA	MO 65201-3874 MO 65201-3874 WD MO 65201-3874 MO 65201-6584 D DRIVE MO 65201-6584	Level of Care: ALF** County BOONE Region 6  Telephone (573) 449-1246 Level of Care: SNF County BOONE Region 6 Medicare/Medicaid  Telephone (573) 397-7144 Level of Care: SNF County BOONE	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	59 No 28191 No 52 No 01715
COLUMBIA Mailing Address 1510 CHAPEL HILL COLUMBIA  COLUMBIA MANOR HEALTH & 1 2012 E. NIFONG BLVD COLUMBIA Mailing Address 2012 E. NIFONG BL COLUMBIA  COLUMBIA POST ACUTE 3535 BERRYWOOD DRIVE COLUMBIA Mailing Address 3535 BERRYWOOD COLUMBIA  COLUMBIA COLUMBIA COLUMBIA COLUMBIA	MO 65201-3874 MO 65201-3874 WD MO 65201-3874 MO 65201-6584 D DRIVE MO 65201-6584	Level of Care: ALF** County BOONE Region 6  Telephone (573) 449-1246 Level of Care: SNF County BOONE Region 6 Medicare/Medicaid  Telephone (573) 397-7144 Level of Care: SNF County BOONE Region 6 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	59 No 28191 No 52 No 01715
COLUMBIA Mailing Address 1510 CHAPEL HILL COLUMBIA  COLUMBIA MANOR HEALTH & 1 2012 E. NIFONG BLVD COLUMBIA Mailing Address 2012 E. NIFONG BL COLUMBIA  COLUMBIA POST ACUTE 3535 BERRYWOOD DRIVE COLUMBIA Mailing Address 3535 BERRYWOOD COLUMBIA  COLUMBIA	MO 65203-5457  REHABILITATION  MO 65201-3874  VD  MO 65201-3874  MO 65201-6584  D DRIVE  MO 65201-6584  AL CARE CENTER LLC	Level of Care: ALF** County BOONE Region 6  Telephone (573) 449-1246 Level of Care: SNF County BOONE Region 6 Medicare/Medicaid  Telephone (573) 397-7144 Level of Care: SNF County BOONE Region 6 Medicare/Medicaid  Telephone (573) 756-7481	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	59 No 28191 No 52 No 01715 No 70 No 30959

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COMMUNITIES OF WILDWOOD R	ANCH		
3222 SOUTH JOHN DUFFY DR		<b>Telephone</b> (417) 621-0175	Alzheimer's Unit No
JOPLIN	MO 64804-1569	Level of Care: SNF	<b>Bed Capacity</b> 120
Mailing Address 3222 SOUTH JOHN I	DUFFY DR	County JASPER	<b>DMH Licensed</b> No
JOPLIN	MO 64804-1569	Region 1 Medicare/Medicaid	Facility Number 29077
COMMUNITY MANOR			
		T-11 (572) 756 9009	Al-Laimanta II-i4 No
783 WEBER ROAD	MO (2640 2210	<b>Telephone</b> (573) 756-8998	Alzheimer's Unit No
FARMINGTON	MO 63640-3318	Level of Care: SNF	Bed Capacity 99
Mailing Address 783 WEBER RD		County SAINT FRANCOIS	DMH Licensed No
FARMINGTON	MO 63640-3318	Region 2 Medicare/Medicaid	Facility Number 13887
COMMUNITY OF AUTUMN COURT	T AT MT VERNON, THE		
1421 S LANDRUM ST		<b>Telephone</b> (417) 466-3549	Alzheimer's Unit No
MOUNT VERNON	MO 65712-1912	Level of Care: ALF**	<b>Bed Capacity</b> 34
Mailing Address 1421 S LANDRUM S	T	County LAWRENCE	<b>DMH Licensed</b> No
MOUNT VERNON	MO 65712-1912	Region 1	Facility Number 20809
COMMUNITY SPRINGS HEALTHC	ARE FACILITY		
400 EAST HOSPITAL RD		<b>Telephone</b> (417) 876-2531	Alzheimer's Unit Yes
EL DORADO SPRINGS	MO 64744-2024	Level of Care: SNF	Bed Capacity 120
Mailing Address 400 EAST HOSPITAL	L RD	County CEDAR	DMH Licensed No
EL DORADO SPRINGS	MO 64744-2024	Region 1 Medicare/Medicaid	Facility Number 01740
		Region 1 Wicultary Micultaru	Tuemey Number 01740
CONVERSE HOME			
17025 OLD JAMESTOWN RD		Telephone (214) 255 9041	Alzheimer's Unit No
	MO (2024 1414	<b>Telephone</b> (314) 355-8041	
FLORISSANT	MO 63034-1414	Level of Care: RCF	Bed Capacity 12
Mailing Address 17025 OLD JAMESTO		County SAINT LOUIS COUNTY	DMH Licensed Yes
FLORISSANT	MO 63034-1414	Region 7	Facility Number 01777
COOPER HOUSE		T. I	
4385 MARYLAND AVE		<b>Telephone</b> (314) 535-1919	Alzheimer's Unit No
SAINT LOUIS	MO 63108-2703	Level of Care: RCF*	<b>Bed Capacity</b> 36
Mailing Address 4385 MARYLAND A		County SAINT LOUIS CITY	<b>DMH Licensed</b> Yes
SAINT LOUIS	MO 63108-2703	Region 7	Facility Number 21439
COPPER ROCK HEALTHCARE			
712 COPPER ROCK DRIVE		<b>Telephone</b> (417) 202-4606	Alzheimer's Unit No
ROGERSVILLE	MO 65742-8970	Level of Care: SNF	<b>Bed Capacity</b> 90
Mailing Address PO BOX 560		County WEBSTER	DMH Licensed No
ROGERSVILLE	MO 65742-8970	Region 1 Medicare/Medicaid	Facility Number 31851
CORNERSTONE LIVING CENTER			
533 E CANNAN RD		<b>Telephone</b> (573) 764-5141	Alzheimer's Unit NO
GERALD	MO 63037-2515	Level of Care: ALF**	<b>Bed Capacity</b> 60
Mailing Address 533 E CANNAN RD		County FRANKLIN	DMH Licensed No
GERALD	MO 63037-2515	Region 6	Facility Number 13926
	· · · · · · · · · · · · · · · · · · ·	8	13720

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COTTAGE AT CENTURY PINES, T	ГНЕ		
707 EAST MCCRACKEN ROAD		<b>Telephone</b> (417) 551-4608	Alzheimer's Unit Yes
OZARK	MO 65721-9499	Level of Care: ALF**	<b>Bed Capacity</b> 24
Mailing Address 709 EAST MCCRAO	CKEN ROAD	County CHRISTIAN	<b>DMH Licensed</b> No
OZARK	MO 65721-9499	Region 1	Facility Number 30579
COTTAGES OF LAKE ST LOUIS			
2885 TECHNOLOGY DRIVE		<b>Telephone</b> (636) 614-3510	Alzheimer's Unit No
LAKE SAINT LOUIS	MO 63367-4123	Level of Care: SNF	Bed Capacity 60
Mailing Address 2885 TECHNOLOG	Y DRIVE	County SAINT CHARLES	DMH Licensed No
LAKE SAINT LOUIS	MO 63367-4123	Region 5 Medicare	Facility Number 30318
COTTON POINT LIVING CENTER	•		
609 SOUTH RAILROAD ST	•	<b>Telephone</b> (573) 471-7861	Alzheimer's Unit Yes
MATTHEWS	MO 63867-9751	Level of Care: SNF	Bed Capacity 98
Mailing Address 609 SOUTH RAILR		County NEW MADRID	DMH Licensed No
MATTHEWS	MO 63867-9751	Region 2 Medicare/Medicaid	Facility Number 07057
THE THE WO	110 03007 7731	Region 2 Medicare/Medicard	Tacing Number 07037
COUNTRY AIRE ESTATES, LLC			
49303 RENSSELAER LN		<b>Telephone</b> (573) 221-5400	Alzheimer's Unit No
HANNIBAL	MO 63401-7356	<b>Level of Care:</b> RCF*	<b>Bed Capacity</b> 16
Mailing Address 49303 RENSSELAE	R LN	County RALLS	<b>DMH Licensed</b> Yes
HANNIBAL	MO 63401-7356	Region 5	Facility Number 14270
COUNTRY AIRE RETIREMENT C	ENTER		
18540 STATE HIGHWAY 16		<b>Telephone</b> (573) 215-2216	Alzheimer's Unit No
LEWISTOWN	MO 63452-2111	Level of Care: RCF*	Bed Capacity 8
Mailing Address 18540 STATE HIGH	IWAY 16	County LEWIS	DMH Licensed No
LEWISTOWN	MO 63452-2111	Region 5	Facility Number 16896
COUNTRY AIRE RETIREMENT C	ENTER		
18540 STATE HIGHWAY 16		<b>Telephone</b> (573) 215-2216	Alzheimer's Unit No
LEWISTOWN	MO 63452-2111	Level of Care: SNF	Bed Capacity 60
Mailing Address 18540 STATE HIGH		County LEWIS	DMH Licensed No
LEWISTOWN	MO 63452-2111	Region 5 Medicare/Medicaid	Facility Number 16896
COUNTRY CLUB REHAB AND HE	CALTHCARE CENTER		
503 REGENT DR		<b>Telephone</b> (660) 429-4444	Alzheimer's Unit No
WARRENSBURG	MO 64093-3231	Level of Care: RCF*	Bed Capacity 36
Mailing Address 503 REGENT DR		County JOHNSON	DMH Licensed No
WARRENSBURG	MO 64093-3231	Region 3	Facility Number 20892
COUNTRY CLUB REHAB AND HE	ALTHCARE CENTER		
503 REGENT DR		<b>Telephone</b> (660) 429-4444	Alzheimer's Unit No
WARRENSBURG	MO 64093-3231	Level of Care: SNF	Bed Capacity 73
Mailing Address 503 REGENT DR		County JOHNSON	DMH Licensed No
WARRENSBURG	MO 64093-3231	Region 3 Medicare/Medicaid	Facility Number 20892

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COUNTRY LIVING ASSISTED LIVING		
2820 NORTH MAIN ST	Telephone (417) 926-1955 Alzheimer's Unit	No
MOUNTAIN GROVE MO 65711-		40
Mailing Address 2820 NORTH MAIN ST		No
MOUNTAIN GROVE MO 65711-		548
MOUNTAIN GROVE MO 03/11-	1405 Region 1 Facinty Number 27.	346
COUNTRY MEADOWS		
1301 N ST JOE DR	Telephone (573) 431-2889 Alzheimer's Unit	No
PARK HILLS MO 63601-	1965 Level of Care: ALF Bed Capacity	15
Mailing Address 1301 N ST JOE DR		No
PARK HILLS MO 63601-		443
	Negon - Leany Manager	115
COUNTRY MEADOWS		
1301 N ST JOE DR	Telephone (573) 431-2889 Alzheimer's Unit	No
PARK HILLS MO 63601-	1965 Level of Care: SNF Bed Capacity	72
Mailing Address 1301 N ST JOE DR	County SAINT FRANCOIS DMH Licensed	No
PARK HILLS MO 63601-	1965 Region 2 Medicare/Medicaid Facility Number 144	443
CONTROL DV 1 CF		
COUNTRY PLACE		
28601 US HIGHWAY 61	. ,	No
SCOTT CITY MO 63780-		24
Mailing Address 28601 US HIGHWAY 61		No
SCOTT CITY MO 63780-	9143 Region 2 Facility Number 259	934
COUNTRY VIEW NURSING		
COUNTRY VIEW NURSING 2106 WEST MAIN ST	Telephone (573) 324-2216 Alzheimer's Unit	No
2106 WEST MAIN ST	• ` '	No 60
2106 WEST MAIN ST BOWLING GREEN MO 63334-	1049 Level of Care: SNF Bed Capacity	60
2106 WEST MAIN ST BOWLING GREEN MO 63334- Mailing Address PO BOX 330	1049 Level of Care: SNF Bed Capacity County PIKE DMH Licensed	60 No
2106 WEST MAIN ST BOWLING GREEN MO 63334-	1049 Level of Care: SNF Bed Capacity County PIKE DMH Licensed	60
2106 WEST MAIN ST BOWLING GREEN MO 63334- Mailing Address PO BOX 330	1049 Level of Care: SNF Bed Capacity County PIKE DMH Licensed	60 No
2106 WEST MAIN ST BOWLING GREEN MO 63334- Mailing Address PO BOX 330 BOWLING GREEN MO 63334-	1049 Level of Care: SNF Bed Capacity County PIKE DMH Licensed 0330 Region 5 Medicare/Medicaid Facility Number 149	60 No
2106 WEST MAIN ST BOWLING GREEN MO 63334- Mailing Address PO BOX 330 BOWLING GREEN MO 63334-  COUNTRYSIDE CARE CENTER, LLC	Level of Care: SNF Bed Capacity County PIKE DMH Licensed  Region 5 Medicare/Medicaid Facility Number 149  Telephone (417) 235-4040 Alzheimer's Unit	60 No 926
2106 WEST MAIN ST BOWLING GREEN MO 63334- Mailing Address PO BOX 330 BOWLING GREEN MO 63334-  COUNTRYSIDE CARE CENTER, LLC 385 SOUTH EISENHOWER	1049 Level of Care: SNF Bed Capacity County PIKE DMH Licensed 0330 Region 5 Medicare/Medicaid Facility Number 149  Telephone (417) 235-4040 Alzheimer's Unit Level of Care: RCF* Bed Capacity	60 No 926 No
2106 WEST MAIN ST BOWLING GREEN MO 63334- Mailing Address PO BOX 330 BOWLING GREEN MO 63334-  COUNTRYSIDE CARE CENTER, LLC 385 SOUTH EISENHOWER MONETT MO 65708-	Level of Care: SNF Bed Capacity County PIKE DMH Licensed Region 5 Medicare/Medicaid Facility Number 149  Telephone (417) 235-4040 Alzheimer's Unit Level of Care: RCF* Bed Capacity County BARRY DMH Licensed	60 No 926 No 33
2106 WEST MAIN ST BOWLING GREEN MO 63334-  Mailing Address PO BOX 330 BOWLING GREEN MO 63334-  COUNTRYSIDE CARE CENTER, LLC 385 SOUTH EISENHOWER MONETT MO 65708-  Mailing Address PO BOX 434 MONETT MO 65708-	Level of Care: SNF Bed Capacity County PIKE DMH Licensed  Region 5 Medicare/Medicaid Facility Number 149  Telephone (417) 235-4040 Alzheimer's Unit Level of Care: RCF* Bed Capacity County BARRY DMH Licensed	60 No 926 No 33 Yes
2106 WEST MAIN ST BOWLING GREEN MO 63334-  Mailing Address PO BOX 330 BOWLING GREEN MO 63334-  COUNTRYSIDE CARE CENTER, LLC 385 SOUTH EISENHOWER MONETT MO 65708-  Mailing Address PO BOX 434 MONETT MO 65708-  COUNTRYSIDE ESTATES	Level of Care: SNF Bed Capacity County PIKE DMH Licensed  Region 5 Medicare/Medicaid Facility Number 149  Telephone (417) 235-4040 Alzheimer's Unit Level of Care: RCF* Bed Capacity County BARRY DMH Licensed  Region 1 Facility Number 127	60 No 926 No 33 Yes 737
2106 WEST MAIN ST BOWLING GREEN MO 63334- Mailing Address PO BOX 330 BOWLING GREEN MO 63334-  COUNTRYSIDE CARE CENTER, LLC 385 SOUTH EISENHOWER MONETT MO 65708- Mailing Address PO BOX 434 MONETT MO 65708- COUNTRYSIDE ESTATES 500 NORTH OHIO	Level of Care: SNF Bed Capacity County PIKE DMH Licensed Region 5 Medicare/Medicaid Facility Number 149  Telephone (417) 235-4040 Alzheimer's Unit Level of Care: RCF* Bed Capacity County BARRY DMH Licensed O434 Region 1 Facility Number 120  Telephone (660) 476-2128 Alzheimer's Unit	60 No 926 No 33 Yes 737
2106 WEST MAIN ST BOWLING GREEN MO 63334- Mailing Address PO BOX 330 BOWLING GREEN MO 63334-  COUNTRYSIDE CARE CENTER, LLC 385 SOUTH EISENHOWER MONETT MO 65708- Mailing Address PO BOX 434 MONETT MO 65708-  COUNTRYSIDE ESTATES 500 NORTH OHIO APPLETON CITY MO 64724-	Level of Care: SNF Bed Capacity County PIKE DMH Licensed Region 5 Medicare/Medicaid Facility Number 149  Telephone (417) 235-4040 Alzheimer's Unit Level of Care: RCF* Bed Capacity County BARRY DMH Licensed  Telephone (660) 476-2128 Alzheimer's Unit Level of Care: RCF* Bed Capacity Region 1 Facility Number 127	60 No 926 No 33 Yes 737
2106 WEST MAIN ST BOWLING GREEN MO 63334-  Mailing Address PO BOX 330 BOWLING GREEN MO 63334-  COUNTRYSIDE CARE CENTER, LLC 385 SOUTH EISENHOWER MONETT MO 65708-  Mailing Address PO BOX 434 MONETT MO 65708-  COUNTRYSIDE ESTATES 500 NORTH OHIO APPLETON CITY MO 64724-  Mailing Address PO BOX 98	Level of Care: SNF Bed Capacity County PIKE DMH Licensed Region 5 Medicare/Medicaid Facility Number 149  Telephone (417) 235-4040 Alzheimer's Unit Level of Care: RCF* Bed Capacity County BARRY DMH Licensed  Telephone (660) 476-2128 Alzheimer's Unit Level of Care: RCF* Bed Capacity County SAINT CLAIR DMH Licensed	60 No 926 No 33 Yes 737
2106 WEST MAIN ST BOWLING GREEN MO 63334- Mailing Address PO BOX 330 BOWLING GREEN MO 63334-  COUNTRYSIDE CARE CENTER, LLC 385 SOUTH EISENHOWER MONETT MO 65708- Mailing Address PO BOX 434 MONETT MO 65708-  COUNTRYSIDE ESTATES 500 NORTH OHIO APPLETON CITY MO 64724-	Level of Care: SNF Bed Capacity County PIKE DMH Licensed Region 5 Medicare/Medicaid Facility Number 149  Telephone (417) 235-4040 Alzheimer's Unit Level of Care: RCF* Bed Capacity County BARRY DMH Licensed  Telephone (660) 476-2128 Alzheimer's Unit Level of Care: RCF* Bed Capacity Number 127  Telephone (660) 476-2128 Alzheimer's Unit Level of Care: RCF* Bed Capacity County SAINT CLAIR DMH Licensed	60 No 926 No 33 Yes 737
2106 WEST MAIN ST BOWLING GREEN MO 63334-  Mailing Address PO BOX 330 BOWLING GREEN MO 63334-  COUNTRYSIDE CARE CENTER, LLC 385 SOUTH EISENHOWER MONETT MO 65708-  Mailing Address PO BOX 434 MONETT MO 65708-  COUNTRYSIDE ESTATES 500 NORTH OHIO APPLETON CITY MO 64724-  Mailing Address PO BOX 98	Level of Care: SNF Bed Capacity County PIKE DMH Licensed Region 5 Medicare/Medicaid Facility Number 149  Telephone (417) 235-4040 Alzheimer's Unit Level of Care: RCF* Bed Capacity County BARRY DMH Licensed  Telephone (660) 476-2128 Alzheimer's Unit Level of Care: RCF* Bed Capacity County SAINT CLAIR DMH Licensed	60 No 926 No 33 Yes 737
2106 WEST MAIN ST BOWLING GREEN MO 63334-  Mailing Address PO BOX 330 BOWLING GREEN MO 63334-  COUNTRYSIDE CARE CENTER, LLC 385 SOUTH EISENHOWER MONETT MO 65708-  Mailing Address PO BOX 434 MONETT MO 65708-  COUNTRYSIDE ESTATES 500 NORTH OHIO APPLETON CITY MO 64724-  Mailing Address PO BOX 98 APPLETON CITY MO 64724-	Level of Care: SNF Bed Capacity County PIKE DMH Licensed  Region 5 Medicare/Medicaid Facility Number 149  Telephone (417) 235-4040 Alzheimer's Unit Level of Care: RCF* Bed Capacity County BARRY DMH Licensed  Region 1 Facility Number 127  Telephone (660) 476-2128 Alzheimer's Unit Level of Care: RCF* Bed Capacity County SAINT CLAIR DMH Licensed  Region 1 Facility Number 150  Region 1 Facility Number 150	60 No 926 No 33 Yes 737
2106 WEST MAIN ST BOWLING GREEN MO 63334- Mailing Address PO BOX 330 BOWLING GREEN MO 63334-  COUNTRYSIDE CARE CENTER, LLC 385 SOUTH EISENHOWER MONETT MO 65708- Mailing Address PO BOX 434 MONETT MO 65708-  COUNTRYSIDE ESTATES 500 NORTH OHIO APPLETON CITY MO 64724- Mailing Address PO BOX 98 APPLETON CITY MO 64724- COUNTRYSIDE HOME, LLC	Level of Care: SNF Bed Capacity County PIKE DMH Licensed  Region 5 Medicare/Medicaid Facility Number 149  Telephone (417) 235-4040 Alzheimer's Unit Level of Care: RCF* Bed Capacity County BARRY DMH Licensed  Region 1 Facility Number 127  Telephone (660) 476-2128 Alzheimer's Unit Level of Care: RCF* Bed Capacity County SAINT CLAIR DMH Licensed Region 1 Facility Number 150  Telephone (417) 532-7418 Alzheimer's Unit  Telephone (417) 532-7418 Alzheimer's Unit	60 No 926 No 33 Yes 737 No 24 No 005
2106 WEST MAIN ST BOWLING GREEN MO 63334-  Mailing Address PO BOX 330 BOWLING GREEN MO 63334-  COUNTRYSIDE CARE CENTER, LLC 385 SOUTH EISENHOWER MONETT MO 65708-  Mailing Address PO BOX 434 MONETT MO 65708-  COUNTRYSIDE ESTATES 500 NORTH OHIO APPLETON CITY MO 64724-  Mailing Address PO BOX 98 APPLETON CITY MO 64724-  COUNTRYSIDE HOME, LLC 24499 PARK DR	Level of Care: SNF County PIKE DMH Licensed  Region 5 Medicare/Medicaid Facility Number  Telephone (417) 235-4040 Alzheimer's Unit Level of Care: RCF* County BARRY DMH Licensed  Region 1 Facility Number  Telephone (660) 476-2128 Alzheimer's Unit Level of Care: RCF* Bed Capacity County SAINT CLAIR DMH Licensed Region 1 Facility Number  Telephone (417) 532-7418 Alzheimer's Unit Level of Care: RCF* Bed Capacity County SAINT CLAIR DMH Licensed Facility Number  Telephone (417) 532-7418 Alzheimer's Unit Level of Care: RCF Bed Capacity	60 No 926 No 33 Yes 737 No 24 No 005
2106 WEST MAIN ST BOWLING GREEN MO 63334-  Mailing Address PO BOX 330 BOWLING GREEN MO 63334-  COUNTRYSIDE CARE CENTER, LLC 385 SOUTH EISENHOWER MONETT MO 65708-  Mailing Address PO BOX 434 MONETT MO 65708-  COUNTRYSIDE ESTATES 500 NORTH OHIO APPLETON CITY MO 64724-  Mailing Address PO BOX 98 APPLETON CITY MO 64724-  COUNTRYSIDE HOME, LLC 24499 PARK DR LEBANON MO 65536-	Level of Care: SNF Bed Capacity County PIKE DMH Licensed  Region 5 Medicare/Medicaid Facility Number 149  Telephone (417) 235-4040 Alzheimer's Unit Level of Care: RCF* Bed Capacity County BARRY DMH Licensed  Region 1 Facility Number 127  Telephone (660) 476-2128 Alzheimer's Unit Level of Care: RCF* Bed Capacity County SAINT CLAIR DMH Licensed  Region 1 Facility Number 150  Telephone (417) 532-7418 Alzheimer's Unit Level of Care: RCF Bed Capacity County LACLEDE DMH Licensed	60 No 926 No 33 Yes 737 No 24 No 005

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<sup>\*\*</sup> Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

CRAB APPLE VILLAGE SENIOR ESTATES				
214 HARTMAN PL, SUITE 100	Telephone	(636) 629-6161	Alzheimer's Unit	Yes
SAINT CLAIR MO 63	3077-2458 Level of Car	e: ALF**	Bed Capacity	65
Mailing Address 214 HARTMAN PL, SUITE 100	OO County	FRANKLIN	DMH Licensed	No
SAINT CLAIR MO 63	3077-2458 <b>Region</b> 6		Facility Number	24395
CRANE RESIDENTIAL CARE HOME				
102 EAST LILLIAN AVE.	Telephone	(417) 723-5900	Alzheimer's Unit	No
	5633-9103 Level of Car	, ,	Bed Capacity	36
			DMH Licensed	Yes
Mailing Address 102 EAST LILLIAN AVE.  CRANE MO 65	· · ·	STONE		
CRAINE MO 03	5633-9103 <b>Region</b> 1		Facility Number	01898
CRAWFORD RANCH BOARDING HOME, LI		(###) ### :		
2200 VARVERA RD	Telephone	` '	Alzheimer's Unit	No
	3637-3121 Level of Car		Bed Capacity	32
Mailing Address 2200 VARVERA RD	County	SAINT FRANCOIS	DMH Licensed	Yes
DOE RUN MO 63	3637-3121 <b>Region</b> 2		Facility Number	13193
CRESTVIEW HOME				
1313 SOUTH 25TH ST	Telephone	(660) 425-3128	Alzheimer's Unit	No
BETHANY MO 64	4424-2634 Level of Car	e: SNF	Bed Capacity	92
Mailing Address PO BOX 430	County	HARRISON	DMH Licensed	No
BETHANY MO 64	4424-0430 <b>Region</b> 4	Medicare/Medicaid	Facility Number	01936
CRESTWOOD HEALTH CARE CENTER, LL				
CRESTWOOD HEALTH CARE CENTER, LL 11400 MEHL AVE	LC Telephone	(314) 741-3525	Alzheimer's Unit	No
11400 MEHL AVE		` '	Alzheimer's Unit Bed Capacity	No 150
11400 MEHL AVE	Telephone 3033-7204 Level of Car	re: SNF		
11400 MEHL AVE FLORISSANT MO 63 Mailing Address 11400 MEHL AVE	Telephone 3033-7204 Level of Car	re: SNF SAINT LOUIS COUNTY	Bed Capacity	150
11400 MEHL AVE FLORISSANT MO 63 Mailing Address 11400 MEHL AVE FLORISSANT MO 63	Telephone Level of Car County Region 7	re: SNF SAINT LOUIS COUNTY	Bed Capacity DMH Licensed	150 No
11400 MEHL AVE FLORISSANT MO 63 Mailing Address 11400 MEHL AVE FLORISSANT MO 63  CREVE COEUR ASSISTED LIVING AND ME	Telephone  3033-7204 Level of Car County  Region 7  EMORY CARE	re: SNF SAINT LOUIS COUNTY Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number	150 No 14296
FLORISSANT MO 63  Mailing Address 11400 MEHL AVE  FLORISSANT MO 63  CREVE COEUR ASSISTED LIVING AND ME 693 DECKER LN	Telephone 3033-7204 Level of Car County Region 7  EMORY CARE Telephone	re: SNF SAINT LOUIS COUNTY Medicare/Medicaid  (314) 997-4532	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	150 No 14296 Yes
FLORISSANT MO 63  Mailing Address 11400 MEHL AVE  FLORISSANT MO 63  CREVE COEUR ASSISTED LIVING AND ME 693 DECKER LN  CREVE COEUR MO 63	Telephone 3033-7204 Level of Car County Region 7  EMORY CARE Telephone 3141-7127 Level of Car	re: SNF SAINT LOUIS COUNTY Medicare/Medicaid  (314) 997-4532 re: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	150 No 14296 Yes 110
FLORISSANT MO 63  Mailing Address 11400 MEHL AVE  FLORISSANT MO 63  CREVE COEUR ASSISTED LIVING AND ME 693 DECKER LN  CREVE COEUR MO 63  Mailing Address 693 DECKER LANE	Telephone 3033-7204 Level of Car County Region 7  EMORY CARE Telephone Level of Car County  Level of Car County	re: SNF SAINT LOUIS COUNTY Medicare/Medicaid  (314) 997-4532 re: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	150 No 14296 Yes
FLORISSANT MO 63  Mailing Address 11400 MEHL AVE  FLORISSANT MO 63  CREVE COEUR ASSISTED LIVING AND ME 693 DECKER LN  CREVE COEUR MO 63  Mailing Address 693 DECKER LANE	Telephone 3033-7204 Level of Car County Region 7  EMORY CARE Telephone 3141-7127 Level of Car	re: SNF SAINT LOUIS COUNTY Medicare/Medicaid  (314) 997-4532 re: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	150 No 14296 Yes 110
FLORISSANT MO 63  Mailing Address 11400 MEHL AVE FLORISSANT MO 63  CREVE COEUR ASSISTED LIVING AND ME 693 DECKER LN CREVE COEUR MO 63  Mailing Address 693 DECKER LANE CREVE COEUR MO 63	Telephone 3033-7204 Level of Car County Region 7  EMORY CARE Telephone Level of Car County  Level of Car County	re: SNF SAINT LOUIS COUNTY Medicare/Medicaid  (314) 997-4532 re: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	150 No 14296 Yes 110 No
FLORISSANT MO 63  Mailing Address 11400 MEHL AVE FLORISSANT MO 63  CREVE COEUR ASSISTED LIVING AND ME 693 DECKER LN CREVE COEUR MANOR  CREVE COEUR MANOR	Telephone Level of Car County Region 7  EMORY CARE Telephone Level of Car County Region 7  EMORY CARE Telephone Level of Car County Region 7	re: SNF SAINT LOUIS COUNTY Medicare/Medicaid  (314) 997-4532 re: ALF** SAINT LOUIS COUNTY	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	150 No 14296 Yes 110 No 29440
FLORISSANT MO 63  Mailing Address 11400 MEHL AVE FLORISSANT MO 63  CREVE COEUR ASSISTED LIVING AND ME 693 DECKER LN CREVE COEUR MAIling Address 693 DECKER LANE CREVE COEUR MANOR 1127 TIMBER RUN DR	Telephone  3033-7204 Level of Car County  Region 7  EMORY CARE  Telephone  141-7127 Level of Car County  Region 7  Telephone  Telephone	re: SNF SAINT LOUIS COUNTY Medicare/Medicaid  (314) 997-4532 re: ALF** SAINT LOUIS COUNTY	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	150 No 14296 Yes 110 No 29440
FLORISSANT MO 63  Mailing Address 11400 MEHL AVE FLORISSANT MO 63  CREVE COEUR ASSISTED LIVING AND ME 693 DECKER LN CREVE COEUR MO 63  Mailing Address 693 DECKER LANE CREVE COEUR MANOR 1127 TIMBER RUN DR SAINT LOUIS MO 63	Telephone Level of Car County Region 7  EMORY CARE Telephone Level of Car County Region 7  Telephone Level of Car County Region 7  Telephone Level of Car County Region 7	re: SNF SAINT LOUIS COUNTY Medicare/Medicaid  (314) 997-4532 re: ALF** SAINT LOUIS COUNTY  (314) 434-8361 re: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	150 No 14296 Yes 110 No 29440
FLORISSANT MO 63  Mailing Address 11400 MEHL AVE FLORISSANT MO 63  CREVE COEUR ASSISTED LIVING AND ME 693 DECKER LN CREVE COEUR MANOR CREVE COEUR MANOR 1127 TIMBER RUN DR SAINT LOUIS MO 63  Mailing Address 1127 TIMBER RUN DR	Telephone Level of Car County  3033-7204 Region 7  EMORY CARE Telephone Level of Car County  3141-7127 Level of Car County  Region 7  Telephone Level of Car County  Telephone Level of Car County	re: SNF SAINT LOUIS COUNTY Medicare/Medicaid  (314) 997-4532 re: ALF** SAINT LOUIS COUNTY  (314) 434-8361 re: SNF SAINT LOUIS COUNTY	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	150 No 14296 Yes 110 No 29440
FLORISSANT MO 63  Mailing Address 11400 MEHL AVE FLORISSANT MO 63  CREVE COEUR ASSISTED LIVING AND ME 693 DECKER LN CREVE COEUR MANOR CREVE COEUR MANOR 1127 TIMBER RUN DR SAINT LOUIS MO 63  Mailing Address 1127 TIMBER RUN DR	Telephone Level of Car County Region 7  EMORY CARE Telephone Level of Car County Region 7  Telephone Level of Car County Region 7  Telephone Level of Car County Region 7	re: SNF SAINT LOUIS COUNTY Medicare/Medicaid  (314) 997-4532 re: ALF** SAINT LOUIS COUNTY  (314) 434-8361 re: SNF SAINT LOUIS COUNTY	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	150 No 14296 Yes 110 No 29440
FLORISSANT MO 63  Mailing Address 11400 MEHL AVE FLORISSANT MO 63  CREVE COEUR ASSISTED LIVING AND ME 693 DECKER LN CREVE COEUR MAILING ADDRESSED	Telephone Level of Car County  3033-7204 Region 7  EMORY CARE Telephone Level of Car County  3141-7127 Level of Car County  Region 7  Telephone Level of Car County  Telephone Level of Car County	re: SNF SAINT LOUIS COUNTY Medicare/Medicaid  (314) 997-4532 re: ALF** SAINT LOUIS COUNTY  (314) 434-8361 re: SNF SAINT LOUIS COUNTY	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	150 No 14296 Yes 110 No 29440
FLORISSANT MO 63  Mailing Address 11400 MEHL AVE FLORISSANT MO 63  CREVE COEUR ASSISTED LIVING AND ME 693 DECKER LN CREVE COEUR MANOR CREVE COEUR MANOR 1127 TIMBER RUN DR SAINT LOUIS MO 63  Mailing Address 1127 TIMBER RUN DR SAINT LOUIS MO 63  CROSS CREEK AT LEE'S SUMMIT	Telephone Level of Car County  Region 7  EMORY CARE  Telephone Level of Car County  Region 7  Telephone Level of Car County  Region 7  Telephone Level of Car County  Region 7	re: SNF SAINT LOUIS COUNTY Medicare/Medicaid  (314) 997-4532 re: ALF** SAINT LOUIS COUNTY  (314) 434-8361 re: SNF SAINT LOUIS COUNTY Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	150 No 14296 Yes 110 No 29440 No 149 No 02417
FLORISSANT MO 63  Mailing Address 11400 MEHL AVE FLORISSANT MO 63  CREVE COEUR ASSISTED LIVING AND ME 693 DECKER LN CREVE COEUR MANOR CREVE COEUR MANOR 1127 TIMBER RUN DR SAINT LOUIS MO 63  Mailing Address 1127 TIMBER RUN DR SAINT LOUIS MO 63  CROSS CREEK AT LEE'S SUMMIT 3320 NE WILSHIRE DR	Telephone Level of Car County Region 7  EMORY CARE Telephone Level of Car County Region 7  Telephone Level of Car County Region 7  Telephone Level of Car County Region 7  Telephone Level of Car County Region 7	re: SNF SAINT LOUIS COUNTY Medicare/Medicaid  (314) 997-4532 re: ALF** SAINT LOUIS COUNTY  (314) 434-8361 re: SNF SAINT LOUIS COUNTY Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	150 No 14296 Yes 110 No 29440 No 149 No 02417
FLORISSANT MO 63  Mailing Address 11400 MEHL AVE FLORISSANT MO 63  CREVE COEUR ASSISTED LIVING AND ME 693 DECKER LN CREVE COEUR MANOR CREVE COEUR MANOR 1127 TIMBER RUN DR SAINT LOUIS MO 63  Mailing Address 1127 TIMBER RUN DR SAINT LOUIS MO 63  CROSS CREEK AT LEE'S SUMMIT 3320 NE WILSHIRE DR LEE'S SUMMIT MO 64	Telephone Level of Car County Region 7  EMORY CARE Telephone Level of Car County Region 7  Telephone Level of Car County Region 7  Telephone Level of Car County Region 7  Telephone Level of Car County Region 7	re: SNF SAINT LOUIS COUNTY Medicare/Medicaid  (314) 997-4532 re: ALF** SAINT LOUIS COUNTY  (314) 434-8361 re: SNF SAINT LOUIS COUNTY Medicare/Medicaid  (816) 607-5700 re: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	150 No 14296 Yes 110 No 29440 No 02417
FLORISSANT MO 63  Mailing Address 11400 MEHL AVE FLORISSANT MO 63  CREVE COEUR ASSISTED LIVING AND ME 693 DECKER LN CREVE COEUR MANOR CREVE COEUR MANOR 1127 TIMBER RUN DR SAINT LOUIS MO 63  Mailing Address 1127 TIMBER RUN DR SAINT LOUIS MO 63  CROSS CREEK AT LEE'S SUMMIT 3320 NE WILSHIRE DR LEE'S SUMMIT MO 64  Mailing Address 3320 NE WILSHIRE DR	Telephone Level of Car County Region 7  EMORY CARE Telephone Level of Car County Region 7  Telephone Level of Car County Region 7  Telephone Level of Car County Region 7  Telephone Level of Car County Region 7	re: SNF SAINT LOUIS COUNTY Medicare/Medicaid  (314) 997-4532 re: ALF** SAINT LOUIS COUNTY  (314) 434-8361 re: SNF SAINT LOUIS COUNTY Medicare/Medicaid  (816) 607-5700 re: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	150 No 14296 Yes 110 No 29440 No 149 No 02417

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CROWLEY RIDGE CARE CENTER		F. 1. 1. (572) (24.5557		**
1204 NORTH OUTER RD	MO (2041-0/04	<b>Telephone</b> (573) 624-5557	Alzheimer's Unit	Yes 90
DEXTER  Mailing Address PO BOX 668	MO 63841-8684	Level of Care: SNF County STODDARD	Bed Capacity  DMH Licensed	90 No
DEXTER	MO 63841-0668	Region 2 Medicare/Medicaid		12667
DLATER	1410 03041-0000	Region 2 Medicare/Medicard	racinty (unider	12007
CROWN REHAB AND HEALTHCA	RE CENTER			
3001 EAST ELM		<b>Telephone</b> (816) 380-6525	Alzheimer's Unit	No
HARRISONVILLE	MO 64701-1196	Level of Care: SNF	Bed Capacity	118
Mailing Address 3001 EAST ELM		County CASS	DMH Licensed	No
HARRISONVILLE	MO 64701-1196	Region 3 Medicare/Medicaid	Facility Number	21031
CRYSTAL OAKS				
1500 CALVARY CHURCH RD		<b>Telephone</b> (636) 933-1818	Alzheimer's Unit	Yes
FESTUS	MO 63028-4125	Level of Care: ALF**	Bed Capacity	60
Mailing Address 1500 CALVARY CH		County JEFFERSON	DMH Licensed	No
FESTUS	MO 63028-4125	Region 2	Facility Number	99932
CRYSTAL OAKS				
1500 CALVARY CHURCH RD		<b>Telephone</b> (636) 933-1818	Alzheimer's Unit	Yes
FESTUS	MO 63028-4125	Level of Care: SNF	Bed Capacity	131
Mailing Address 1500 CALVARY CH	URCH RD	County JEFFERSON	DMH Licensed	No
FESTUS	MO 63028-4125	Region 2 Medicare/Medicaid	Facility Number	99932
CUBA MANOR, INC				
210 ELDON DR		<b>Telephone</b> (573) 885-4500	Alzheimer's Unit	No
CUBA	MO 65453-1642	Level of Care: SNF	Bed Capacity	90
Mailing Address 210 ELDON DR		County CRAWFORD	DMH Licensed	No
CUBA	MO 65453-1642	Region 6 Medicare/Medicaid	Facility Number	21149
CURRENT RIVER NURSING CENT	ER, INC			
1015 NORTH GRAND AVE	,	<b>Telephone</b> (573) 996-4239	Alzheimer's Unit	Yes
DONIPHAN	MO 63935-1779	Level of Care: SNF	Bed Capacity	120
Mailing Address 1015 NORTH GRAN	D AVE	County RIPLEY	DMH Licensed	No
DONIPHAN	MO 63935-1779	Region 2 Medicare/Medicaid	Facility Number	17125
CVBDECC DOINTE CIVIL I ED NADO	INC DV AMEDICADE			
CYPRESS POINT - SKILLED NURS	ING BY AMERICARE	TO 1 1 (572) (24 9009	AT T TT . M	NI-
801 BAILIFF DR	MO 63841-9500	Telephone (573) 624-8908	Alzheimer's Unit	No 79
DEXTER  Mailing Address 801 BAILIFF DR	1410 03041-3300	Level of Care: SNF County STODDARD	Bed Capacity  DMH Licensed	
DEXTER	MO 63841-9500			No 08315
DLATER	1410 03041-3300	Region 2 Medicare/Medicaid	Facility Number	00313
DAVIESS COUNTY NURSING AND	REHABILITATION			
1337 WEST GRAND		<b>Telephone</b> (660) 663-2197	Alzheimer's Unit	Yes
GALLATIN	MO 64640-8320	Level of Care: SNF	Bed Capacity	97
Mailing Address 1337 WEST GRAND				
GALLATIN	MO 64640-8320	County DAVIESS	DMH Licensed Facility Number	No

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DATED TAX STRUCTURE OF STREET				
DAYBREAK NURSING CENTER 410 H ROAD		Tolonhous (572) 471 7692	Alahaiman'a Tinit	No
SIKESTON	MO 63801-5350	Telephone (573) 471-7683 Level of Care: SNF	Alzheimer's Unit Bed Capacity	70
Mailing Address 410 H ROAD	WO 03801-3330	County SCOTT	DMH Licensed	No
SIKESTON	MO 63801-0430	·	Facility Number	11496
SIKESTON	WIO 03801-0430	Region 2 Medicare/Medicaid	racinty Number	11490
DELHAVEN MANOR				
5460 DELMAR BLVD		<b>Telephone</b> (314) 361-2902	Alzheimer's Unit	No
SAINT LOUIS	MO 63112-3104	Level of Care: SNF	Bed Capacity	156
Mailing Address 5460 DELMAR BLV		County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS	MO 63112-3104	Region 7 Medicare/Medicaid	Facility Number	02089
		region interior interior	Tuesting Transpor	0200)
DELMAR GARDENS NORTH				
4401 PARKER ROAD		<b>Telephone</b> (314) 355-1516	Alzheimer's Unit	Yes
BLACK JACK	MO 63033-4266	Level of Care: SNF	<b>Bed Capacity</b>	240
Mailing Address 4401 PARKER ROA	D	County SAINT LOUIS COUNTY	DMH Licensed	No
BLACK JACK	MO 63033-4266	Region 7 Medicare/Medicaid	Facility Number	14093
DELMAR GARDENS OF CHESTER	FIELD			
14855 NORTH OUTER 40 RD		<b>Telephone</b> (636) 532-0150	Alzheimer's Unit	Yes
CHESTERFIELD	MO 63017-2026	Level of Care: SNF	Bed Capacity	237
Mailing Address 14855 NORTH OUT		County SAINT LOUIS COUNTY	DMH Licensed	No
CHESTERFIELD	MO 63017-2026	Region 7 Medicare/Medicaid	Facility Number	02111
DELMAR GARDENS OF CREVE C	OFTID			
850 COUNTRY MANOR LN	OECK	<b>Telephone</b> (314) 434-5900	Alzheimer's Unit	No
850 COUNTRY MANOR LN CREVE COEUR	MO 63141-6651	Telephone (314) 434-5900 Level of Care: SNF	Alzheimer's Unit Bed Capacity	No 148
	MO 63141-6651	• '		
CREVE COEUR	MO 63141-6651	Level of Care: SNF	Bed Capacity	148
CREVE COEUR  Mailing Address 850 COUNTRY MAI	MO 63141-6651 NOR LN	Level of Care: SNF County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed	148 No
CREVE COEUR  Mailing Address 850 COUNTRY MAI  CREVE COEUR  DELMAR GARDENS OF MERAME	MO 63141-6651 NOR LN MO 63141-6651	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number	148 No 01830
CREVE COEUR  Mailing Address 850 COUNTRY MAI  CREVE COEUR  DELMAR GARDENS OF MERAME  1 ARBOR TERRACE	MO 63141-6651 NOR LN MO 63141-6651 C VALLEY	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (636) 343-0016	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	148 No 01830 Yes
CREVE COEUR  Mailing Address 850 COUNTRY MAI  CREVE COEUR  DELMAR GARDENS OF MERAME  1 ARBOR TERRACE  FENTON	MO 63141-6651 NOR LN MO 63141-6651 C VALLEY MO 63026-3900	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (636) 343-0016 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	148 No 01830 Yes 190
CREVE COEUR  Mailing Address 850 COUNTRY MAI CREVE COEUR  DELMAR GARDENS OF MERAME 1 ARBOR TERRACE FENTON  Mailing Address 1 ARBOR TERRACI	MO 63141-6651  NOR LN  MO 63141-6651  C VALLEY  MO 63026-3900	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (636) 343-0016 Level of Care: SNF County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	148 No 01830 Yes 190 No
CREVE COEUR  Mailing Address 850 COUNTRY MAI  CREVE COEUR  DELMAR GARDENS OF MERAME  1 ARBOR TERRACE  FENTON	MO 63141-6651 NOR LN MO 63141-6651 C VALLEY MO 63026-3900	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (636) 343-0016 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	148 No 01830 Yes 190
CREVE COEUR  Mailing Address 850 COUNTRY MAI CREVE COEUR  DELMAR GARDENS OF MERAME 1 ARBOR TERRACE FENTON  Mailing Address 1 ARBOR TERRACI	MO 63141-6651 NOR LN MO 63141-6651  C VALLEY  MO 63026-3900  MO 63026-3900	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (636) 343-0016 Level of Care: SNF County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	148 No 01830 Yes 190 No
CREVE COEUR  Mailing Address 850 COUNTRY MAI CREVE COEUR  DELMAR GARDENS OF MERAME 1 ARBOR TERRACE FENTON  Mailing Address 1 ARBOR TERRACI FENTON	MO 63141-6651 NOR LN MO 63141-6651  C VALLEY  MO 63026-3900  MO 63026-3900	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (636) 343-0016 Level of Care: SNF County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	148 No 01830 Yes 190 No
CREVE COEUR  Mailing Address 850 COUNTRY MAI CREVE COEUR  DELMAR GARDENS OF MERAME 1 ARBOR TERRACE FENTON  Mailing Address 1 ARBOR TERRACI FENTON  DELMAR GARDENS OF O'FALLOR	MO 63141-6651 NOR LN MO 63141-6651  C VALLEY  MO 63026-3900  MO 63026-3900	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (636) 343-0016 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	148 No 01830 Yes 190 No 13468
CREVE COEUR  Mailing Address 850 COUNTRY MAI CREVE COEUR  DELMAR GARDENS OF MERAME 1 ARBOR TERRACE FENTON  Mailing Address 1 ARBOR TERRACE FENTON  DELMAR GARDENS OF O'FALLO 7068 SOUTH OUTER 364	MO 63141-6651  NOR LN  MO 63141-6651  C VALLEY  MO 63026-3900  MO 63026-3900  N  MO 63368-7757	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (636) 343-0016 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (636) 240-6100	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	148 No 01830 Yes 190 No 13468
CREVE COEUR  Mailing Address 850 COUNTRY MAI CREVE COEUR  DELMAR GARDENS OF MERAME 1 ARBOR TERRACE FENTON  Mailing Address 1 ARBOR TERRACE FENTON  DELMAR GARDENS OF O'FALLO 7068 SOUTH OUTER 364 O'FALLON	MO 63141-6651  NOR LN  MO 63141-6651  C VALLEY  MO 63026-3900  MO 63026-3900  N  MO 63368-7757	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (636) 343-0016 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (636) 240-6100 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	148 No 01830 Yes 190 No 13468
CREVE COEUR  Mailing Address 850 COUNTRY MAI CREVE COEUR  DELMAR GARDENS OF MERAME 1 ARBOR TERRACE FENTON  Mailing Address 1 ARBOR TERRACI FENTON  DELMAR GARDENS OF O'FALLO 7068 SOUTH OUTER 364 O'FALLON  Mailing Address 7068 SOUTH OUTER O'FALLON	MO 63141-6651  NOR LN  MO 63141-6651  C VALLEY  MO 63026-3900  MO 63026-3900  N  MO 63368-7757  R 364  MO 63368-7757	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (636) 343-0016 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (636) 240-6100 Level of Care: SNF County SAINT CHARLES	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	148 No 01830 Yes 190 No 13468 Yes 240
CREVE COEUR  Mailing Address 850 COUNTRY MAI CREVE COEUR  DELMAR GARDENS OF MERAME 1 ARBOR TERRACE FENTON  Mailing Address 1 ARBOR TERRACE FENTON  DELMAR GARDENS OF O'FALLO 7068 SOUTH OUTER 364 O'FALLON  Mailing Address 7068 SOUTH OUTER O'FALLON  DELMAR GARDENS ON THE GRE	MO 63141-6651  NOR LN  MO 63141-6651  C VALLEY  MO 63026-3900  MO 63026-3900  N  MO 63368-7757  R 364  MO 63368-7757	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (636) 343-0016 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (636) 240-6100 Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	148 No 01830 Yes 190 No 13468 Yes 240 No 24291
CREVE COEUR  Mailing Address 850 COUNTRY MAI CREVE COEUR  DELMAR GARDENS OF MERAME 1 ARBOR TERRACE FENTON  Mailing Address 1 ARBOR TERRACI FENTON  DELMAR GARDENS OF O'FALLO 7068 SOUTH OUTER 364 O'FALLON  Mailing Address 7068 SOUTH OUTE O'FALLON  DELMAR GARDENS ON THE GRE 15197 CLAYTON RD	MO 63141-6651  NOR LN  MO 63141-6651  C VALLEY  MO 63026-3900  MO 63026-3900  N  MO 63368-7757  R 364  MO 63368-7757	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (636) 343-0016 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (636) 240-6100 Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid  Telephone (636) 394-7515	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	148 No 01830 Yes 190 No 13468 Yes 240 No 24291
CREVE COEUR  Mailing Address 850 COUNTRY MAI CREVE COEUR  DELMAR GARDENS OF MERAME 1 ARBOR TERRACE FENTON  Mailing Address 1 ARBOR TERRACE FENTON  DELMAR GARDENS OF O'FALLO 7068 SOUTH OUTER 364 O'FALLON  Mailing Address 7068 SOUTH OUTER O'FALLON  DELMAR GARDENS ON THE GRE 15197 CLAYTON RD CHESTERFIELD	MO 63141-6651  NOR LN  MO 63141-6651  C VALLEY  MO 63026-3900  MO 63026-3900  N  MO 63368-7757  R 364  MO 63368-7757  EN  MO 63017-7048	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (636) 343-0016 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (636) 240-6100 Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid  Telephone (636) 394-7515 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	148 No 01830 Yes 190 No 13468 Yes 240 No 24291
CREVE COEUR  Mailing Address 850 COUNTRY MAI CREVE COEUR  DELMAR GARDENS OF MERAME 1 ARBOR TERRACE FENTON  Mailing Address 1 ARBOR TERRACI FENTON  DELMAR GARDENS OF O'FALLO 7068 SOUTH OUTER 364 O'FALLON  Mailing Address 7068 SOUTH OUTE O'FALLON  DELMAR GARDENS ON THE GRE 15197 CLAYTON RD	MO 63141-6651  NOR LN  MO 63141-6651  C VALLEY  MO 63026-3900  MO 63026-3900  N  MO 63368-7757  R 364  MO 63368-7757  EN  MO 63017-7048	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (636) 343-0016 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (636) 240-6100 Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid  Telephone (636) 394-7515	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	148 No 01830 Yes 190 No 13468 Yes 240 No 24291

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DELMAR GARDENS SOUTH			
5300 BUTLER HILL ROAD	<b>Telephone</b> (314) 842-0588	Alzheimer's Unit	Yes
SAINT LOUIS MO 63128-4152	Level of Care: SNF	Bed Capacity	250
Mailing Address 5300 BUTLER HILL RD	County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS MO 63128-4152	Region 7 Medicare/Medicaid	Facility Number	12909
DELMAR GARDENS WEST			
13550 SOUTH OUTER 40 RD	<b>Telephone</b> (314) 878-1330	Alzheimer's Unit	No
TOWN AND COUNTRY MO 63017-5812	Level of Care: SNF	Bed Capacity	321
Mailing Address 13550 SOUTH OUTER 40 RD	County SAINT LOUIS COUNTY	DMH Licensed	No
TOWN AND COUNTRY MO 63017-5812	Region 7 Medicare/Medicaid	Facility Number	02120
	region intercept regions	Tuestey Tvalliser	02120
DELTA SOUTH NURSING & REHABILITATION			
640 COLONEL GEORGE E DAY PARKWAY	<b>Telephone</b> (573) 471-3400	Alzheimer's Unit	NO
SIKESTON MO 63801-0624	Level of Care: SNF	<b>Bed Capacity</b>	60
Mailing Address 640 COLONEL GEORGE E DAY PARKWAY	County NEW MADRID	DMH Licensed	No
SIKESTON MO 63801-0624	Region 2 Medicare/Medicaid	Facility Number	30584
DIANA'S BOARDING HOME 1, INC			
15432 STATE HIGHWAY M	<b>Telephone</b> (573) 866-2010	Alzheimer's Unit	No
MARBLE HILL MO 63764-7487	Level of Care: RCF	Bed Capacity	20
Mailing Address 15431 STATE HIGHWAY M	County BOLLINGER	DMH Licensed	Yes
MARBLE HILL MO 63764-7487	Region 2	Facility Number	11123
MO 03/04 /40/	Region 2	racinty Number	11123
DIANA'S BOARDING HOME 2			
25140 BUZZARD DR	<b>Telephone</b> (573) 238-3344	Alzheimer's Unit	No
MARBLE HILL MO 63764-9408	Level of Care: RCF	<b>Bed Capacity</b>	40
Mailing Address HC 64, BOX 4677	<b>County</b> BOLLINGER	DMH Licensed	Yes
MARBLE HILL MO 63764-9408	Region 2	Facility Number	23940
DIXON NURSING & REHAB			
403 EAST 10TH ST	<b>Telephone</b> (573) 759-2135	Alzheimer's Unit	No
DIXON MO 65459-6049	Level of Care: SNF	Bed Capacity	60
Mailing Address 403 EAST 10TH ST	County PULASKI	DMH Licensed	No
DIXON MO 65459-6049	Region 6 Medicare/Medicaid	Facility Number	15510
		·	
DOLAN MEMORY CARE AT CALAIS			
1225 TENNANT RD	<b>Telephone</b> (314) 993-9500	Alzheimer's Unit	Yes
SAINT LOUIS MO 63146-5523	Level of Care: ALF**	Bed Capacity	44
Mailing Address 11300 DOLAN WAY	County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS MO 63146-	Region 7	Facility Number	27755
DOLAN MEMORY CARE AT CONWAY			
12550 CONWAY RD	<b>Telephone</b> (314) 576-3998	Alzheimer's Unit	Yes
CREVE COEUR MO 63141-8613	Level of Care: ALF**	<b>Bed Capacity</b>	9
Mailing Address 11300 DOLAN WAY	County SAINT LOUIS COUNTY	DMH Licensed	No
ST LOUIS MO 63146-	Region 7	<b>Facility Number</b>	22648

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DOLAN MEMORY CARE AT FRON	TIER			
11566 FRONTIER DR		<b>Telephone</b> (314) 995-5331	Alzheimer's Unit Yes	S
SAINT LOUIS	MO 63146-4873	Level of Care: ALF**	Bed Capacity 20	)
Mailing Address 11300 DOLAN WAY		County SAINT LOUIS COUNTY	DMH Licensed No.	)
ST LOUIS	MO 63146-	Region 7	Facility Number 25162	2
DOLAN MEMORY CARE AT MASO	N MANOR			
12740 MASON MANOR	TO MENOR	<b>Telephone</b> (314) 576-6200	Alzheimer's Unit Yes	c
SAINT LOUIS	MO 63141-7350	Level of Care: ALF**	Bed Capacity 8	
Mailing Address 11300 DOLAN WAY	110 03111 7330	County SAINT LOUIS COUNTY	DMH Licensed No	
SAINT LOUIS	MO 63146-	Region 7	Facility Number 19861	
SAIRVI ECCIS	WO 03140	Region /	racinty Number 19801	ı
DOLAN MEMORY CARE AT SCHU	ETZ			
1706 SCHUETZ RD		<b>Telephone</b> (314) 989-1782	Alzheimer's Unit Yes	
SAINT LOUIS	MO 63146-4931	Level of Care: ALF**	Bed Capacity 10	)
Mailing Address 11300 DOLAN WAY		County SAINT LOUIS COUNTY	DMH Licensed No.	)
SAINT LOUIS	MO 63146-	Region 7	Facility Number 23805	5
DOLAN MEMORY CARE AT WATE	ERFORD CROSSING			
11350 DOLAN WAY		<b>Telephone</b> (314) 993-9500	Alzheimer's Unit Yes	s
SAINT LOUIS	MO 63146-5533	Level of Care: ALF**	Bed Capacity 88	
Mailing Address 11300 DOLAN WAY	MO 03140 3333	County SAINT LOUIS COUNTY	DMH Licensed No	
ST LOUIS	MO 63006-	Region 7	Facility Number 31366	
SI LOCIS	WIO 03000-	Region /	Facility Number 31300	,
DOUGHERTY FERRY ASSISTED L	IVING & MEMORY CARE			
2929 DOUGHERTY FERRY RD		<b>Telephone</b> (636) 825-6665	Alzheimer's Unit Yes	š
SAINT LOUIS	MO 63122-3368	Level of Care: ALF**	Bed Capacity 110	)
Mailing Address 2929 DOUGHERTY I	FERRY RD	County SAINT LOUIS COUNTY	DMH Licensed No.	)
SAINT LOUIS	MO 63122-3368	Region 7	Facility Number 30034	1
DUNN-DUNN HOUSE LLC				
2133 JANNETTE DR		<b>Telephone</b> (314) 869-2431	Alzheimer's Unit No	)
SAINT LOUIS	MO 63136-4020	Level of Care: RCF	Bed Capacity 10	
Mailing Address 2133 JANNETTE DR		County SAINT LOUIS COUNTY	DMH Licensed Yes	
SAINT LOUIS	MO 63136-4020	Region 7	Facility Number 14694	
	3 33-23 . <b>V=V</b>		140)-	•
E W THOMPSON HEALTH & REHA	ABILITATION CENTER			
975 MITCHELL ROAD		<b>Telephone</b> (660) 851-0668	Alzheimer's Unit Yes	S
SEDALIA	MO 65301-2133	Level of Care: SNF	Bed Capacity 66	5
Mailing Address 975 MITCHELL ROA	AD.	County PETTIS	DMH Licensed No.	)
SEDALIA	MO 65301-2133	Region 6 Medicare/Medicaid	Facility Number 30182	2
EASTVIEW MANOR CARE CENTE	R			
1622 EAST 28TH ST		<b>Telephone</b> (660) 359-2251	Alzheimer's Unit No	)
TRENTON	MO 64683-1104	Level of Care: SNF	Bed Capacity 90	
Mailing Address 1622 EAST 28TH ST	1.10 01000 1101	County GRUNDY	DMH Licensed No	
TRENTON	MO 64683-1104		Facility Number 18267	
INDIVION	1410 04003-1104	Region 4 Medicare/Medicaid	1820/	1

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EDGEWOOD MANOR HEALTH CA	RE CENTER		
11900 JESSICA LN		<b>Telephone</b> (816) 358-7858	Alzheimer's Unit No
RAYTOWN	MO 64138-2649	Level of Care: SNF	<b>Bed Capacity</b> 91
Mailing Address 11900 JESSICA LN		County JACKSON	<b>DMH Licensed</b> No
RAYTOWN	MO 64138-2649	Region 3 Medicare/Medicaid	Facility Number 14119
EL DORADO SPRINGS RESIDENTI	AL CARE		
805 NORTH JACKSON ST		<b>Telephone</b> (417) 876-4278	Alzheimer's Unit No
EL DORADO SPRINGS	MO 64744-2912	Level of Care: RCF	Bed Capacity 60
Mailing Address 805 NORTH JACKSO		County CEDAR	DMH Licensed Yes
EL DORADO SPRINGS	MO 64744-2912	Region 1	Facility Number 12621
		region 1	Tuemey (vamper 1202)
ELDON NURSING & REHAB			
1001 E NORTH ST		<b>Telephone</b> (573) 392-3164	Alzheimer's Unit Yes
ELDON	MO 65026-2634	Level of Care: SNF	<b>Bed Capacity</b> 90
Mailing Address 1001 E NORTH ST		County MILLER	<b>DMH Licensed</b> No
ELDON	MO 65026-2634	Region 6 Medicare/Medicaid	Facility Number 06139
ELIZABETH HOUSE			
12284 DE PAUL DR		<b>Telephone</b> (314) 209-8814	Alzheimer's Unit No
BRIDGETON	MO 63044-2508	Level of Care: SNF	<b>Bed Capacity</b> 36
Mailing Address 12284 DE PAUL DR		County SAINT LOUIS COUNTY	DMH Licensed No
BRIDGETON	MO 63044-2508	Region 7	Facility Number 22316
		S	•
ELLISVILLE REHABILITATION A	ND NURSING		
322 OLD STATE ROAD		<b>Telephone</b> (636) 227-3431	Alzheimer's Unit Yes
ELLISVILLE	MO 63021-5917	Level of Care: SNF	Bed Capacity 210
Mailing Address 322 OLD STATE RO.		County SAINT LOUIS COUNTY	DMH Licensed No
ELLISVILLE	MO 63021-5917	Region 7 Medicare/Medicaid	Facility Number 15226
ELSBERRY MISSOURI HEALTH CA	ARE CENTER		
1827 HIGHWAY B		<b>Telephone</b> (573) 898-2880	Alzheimer's Unit NO
ELSBERRY	MO 63343-3126	Level of Care: ALF**	Bed Capacity 12
Mailing Address 1827 HIGHWAY B		County LINCOLN	DMH Licensed No
ELSBERRY	MO 63343-3126	Region 5	Facility Number 02336
EL GRERRY MIGGOLINI WE ALTEN G	A DE CENTER		
ELSBERRY MISSOURI HEALTH CA	AKE CENTEK	m 1 1 (572) 000 0000	
1827 HIGHWAY B	150 (0010 010)	<b>Telephone</b> (573) 898-2880	Alzheimer's Unit No
ELSBERRY	MO 63343-3126	Level of Care: SNF	Bed Capacity 56
Mailing Address 1827 HWY B	MO (2242 242 C	County LINCOLN	DMH Licensed No
ELSBERRY	MO 63343-3126	Region 5 Medicare/Medicaid	Facility Number 02336
EQUILIBRIUM RANCH			
81 PILKENTON LN		<b>Telephone</b> (573) 885-6443	Alzheimer's Unit No
CUBA	MO 65453-8136	Level of Care: RCF	Bed Capacity 19
Mailing Address 81 PILKENTON LN		County CRAWFORD	DMH Licensed No
CUBA	MO 65453-8136	Region 6	Facility Number 15026

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ESSEX BY BRISTOL, THE 301 EAST 3RD		<b>Telephone</b> (660) 829-1758	Alahaiman'a Unit No
	O 65301-4335	Telephone (660) 829-1758 Level of Care: RCF	Alzheimer's Unit No Bed Capacity 24
Mailing Address 301 EAST 3RD	0 03301-4333	County PETTIS	DMH Licensed No
o contract of the contract of	O 65301-4335	Region 6	Facility Number 23020
SEDITER III	0 03301 4333	Region 0	racinty (value)
ESSEX OF CONCORDIA, THE			
402 REDBUD		<b>Telephone</b> (660) 463-0200	Alzheimer's Unit No
CONCORDIA M	O 64020-8358	Level of Care: RCF	Bed Capacity 12
Mailing Address 402 REDBUD		County LAFAYETTE	DMH Licensed No
CONCORDIA Me	O 64020-8358	Region 3	Facility Number 24461
ESSEX OF GRAIN VALLEY, THE 401 SOUTHWEST ROCK CREEK LN		Talanhana (816) 442 2002	Alabaiman'a Unit No
	O 64029-8460	Telephone (816) 443-3992 Level of Care: RCF	Alzheimer's Unit No Bed Capacity 12
Mailing Address 401 SOUTHWEST ROCK		County JACKSON	DMH Licensed No
-	O 64029-8460	Region 3	Facility Number 24475
ORTHV VIELET IVI	0 04027 0400	Region 5	244/3
ESSEX OF LEBANON, THE			
1316 DEADRA DR		<b>Telephone</b> (417) 532-4863	Alzheimer's Unit No
LEBANON Me	O 65536-4609	Level of Care: RCF	<b>Bed Capacity</b> 12
Mailing Address 1316 DEADRA DR		County LACLEDE	DMH Licensed No
LEBANON Me	O 65536-4609	Region 1	Facility Number 24257
EGGEN OF MENTO THE			
ESSEX OF MEXICO, THE		T-l (572) 591 5222	Al-la-i
1109 OLD FARM RD WEST		<b>Telephone</b> (573) 581-5223	Alzheimer's Unit No
MEVICO	0 65265 2250	Loyal of Caron DCE	Pad Canacity 12
	O 65265-3250	Level of Care: RCF	Bed Capacity 12
Mailing Address 1109 OLD FARM RD WE	EST	County AUDRAIN	DMH Licensed No
Mailing Address 1109 OLD FARM RD WE			
Mailing Address 1109 OLD FARM RD WE	EST	County AUDRAIN	DMH Licensed No
Mailing Address 1109 OLD FARM RD WE MEXICO Me	EST	County AUDRAIN	DMH Licensed No
Mailing Address 1109 OLD FARM RD WE MEXICO MO  ESSEX OF OZARK, THE 5173 NORTH 22ND	EST	County AUDRAIN Region 5	DMH Licensed No Facility Number 24425
Mailing Address 1109 OLD FARM RD WE MEXICO MO  ESSEX OF OZARK, THE 5173 NORTH 22ND	O 65265-3250	County AUDRAIN Region 5  Telephone (417) 485-4185	DMH Licensed No Facility Number 24425  Alzheimer's Unit No
Mailing Address 1109 OLD FARM RD WE MEXICO MO  ESSEX OF OZARK, THE 5173 NORTH 22ND OZARK Mailing Address 5173 NORTH 22ND	O 65265-3250	County AUDRAIN Region 5  Telephone (417) 485-4185 Level of Care: RCF	DMH Licensed No Facility Number 24425  Alzheimer's Unit No Bed Capacity 12
Mailing Address 1109 OLD FARM RD WE MEXICO MG  ESSEX OF OZARK, THE 5173 NORTH 22ND OZARK MG Mailing Address 5173 NORTH 22ND OZARK MG	O 65721-7637	County AUDRAIN Region 5  Telephone (417) 485-4185 Level of Care: RCF County CHRISTIAN	DMH Licensed No Facility Number 24425  Alzheimer's Unit No Bed Capacity 12 DMH Licensed No
Mailing Address 1109 OLD FARM RD WE MEXICO MG  ESSEX OF OZARK, THE 5173 NORTH 22ND OZARK Mailing Address 5173 NORTH 22ND OZARK Model of the Model of	O 65721-7637	County AUDRAIN Region 5  Telephone (417) 485-4185 Level of Care: RCF County CHRISTIAN Region 1	DMH Licensed No Facility Number 24425  Alzheimer's Unit No Bed Capacity 12 DMH Licensed No Facility Number 24318
Mailing Address 1109 OLD FARM RD WE MEXICO MG  ESSEX OF OZARK, THE 5173 NORTH 22ND OZARK Mailing Address 5173 NORTH 22ND OZARK MG  ESTATES OF HIDDEN LAKE THE 11728 HIDDEN LAKE DR	O 65265-3250  O 65721-7637  O 65721-7637	County AUDRAIN Region 5  Telephone (417) 485-4185 Level of Care: RCF County CHRISTIAN Region 1  Telephone (314) 355-8833	DMH Licensed No Facility Number 24425  Alzheimer's Unit No Bed Capacity 12 DMH Licensed No Facility Number 24318  Alzheimer's Unit No
Mailing Address 1109 OLD FARM RD WE MEXICO MG  ESSEX OF OZARK, THE 5173 NORTH 22ND OZARK Mailing Address 5173 NORTH 22ND OZARK MG  ESTATES OF HIDDEN LAKE THE 11728 HIDDEN LAKE DR SAINT LOUIS MG	O 65721-7637 O 65721-7637 O 65721-7637	County AUDRAIN Region 5  Telephone (417) 485-4185 Level of Care: RCF County CHRISTIAN Region 1  Telephone (314) 355-8833 Level of Care: ALF	DMH Licensed No Facility Number 24425  Alzheimer's Unit No Bed Capacity 12 DMH Licensed No Facility Number 24318  Alzheimer's Unit No Bed Capacity 38
Mailing Address 1109 OLD FARM RD WE MEXICO MG  ESSEX OF OZARK, THE 5173 NORTH 22ND OZARK Mailing Address 5173 NORTH 22ND OZARK MG  ESTATES OF HIDDEN LAKE THE 11728 HIDDEN LAKE DR SAINT LOUIS MG  Mailing Address 11728 HIDDEN LAKE DE	O 65721-7637 O 65721-7637 O 65721-7637	County AUDRAIN Region 5  Telephone (417) 485-4185 Level of Care: RCF County CHRISTIAN Region 1  Telephone (314) 355-8833 Level of Care: ALF County SAINT LOUIS COUNTY	DMH Licensed No Facility Number 24425  Alzheimer's Unit No Bed Capacity 12 DMH Licensed No Facility Number 24318  Alzheimer's Unit No Bed Capacity 38 DMH Licensed No
Mailing Address 1109 OLD FARM RD WE MEXICO MG  ESSEX OF OZARK, THE 5173 NORTH 22ND OZARK MG  Mailing Address 5173 NORTH 22ND OZARK MG  ESTATES OF HIDDEN LAKE THE 11728 HIDDEN LAKE DR SAINT LOUIS MG  Mailing Address 11728 HIDDEN LAKE DE	O 65721-7637 O 65721-7637 O 65721-7637	County AUDRAIN Region 5  Telephone (417) 485-4185 Level of Care: RCF County CHRISTIAN Region 1  Telephone (314) 355-8833 Level of Care: ALF	DMH Licensed No Facility Number 24425  Alzheimer's Unit No Bed Capacity 12 DMH Licensed No Facility Number 24318  Alzheimer's Unit No Bed Capacity 38
Mailing Address 1109 OLD FARM RD WE MEXICO MG  ESSEX OF OZARK, THE 5173 NORTH 22ND OZARK MG Mailing Address 5173 NORTH 22ND OZARK MG  ESTATES OF HIDDEN LAKE THE 11728 HIDDEN LAKE DR SAINT LOUIS MG Mailing Address 11728 HIDDEN LAKE DE SAINT LOUIS MG ESTATES OF HIDDEN LAKE THE	O 65721-7637 O 65721-7637 O 65721-7637	County AUDRAIN Region 5  Telephone (417) 485-4185 Level of Care: RCF County CHRISTIAN Region 1  Telephone (314) 355-8833 Level of Care: ALF County SAINT LOUIS COUNTY	DMH Licensed No Facility Number 24425  Alzheimer's Unit No Bed Capacity 12 DMH Licensed No Facility Number 24318  Alzheimer's Unit No Bed Capacity 38 DMH Licensed No
Mailing Address 1109 OLD FARM RD WE MEXICO MG  ESSEX OF OZARK, THE 5173 NORTH 22ND OZARK MG Mailing Address 5173 NORTH 22ND OZARK MG  ESTATES OF HIDDEN LAKE THE 11728 HIDDEN LAKE DR SAINT LOUIS MG Mailing Address 11728 HIDDEN LAKE DE SAINT LOUIS MG  ESTATES OF HIDDEN LAKE THE 11728 HIDDEN LAKE DE SAINT LOUIS MG  Mailing Address 11728 HIDDEN LAKE DE SAINT LOUIS MG	O 65265-3250  O 65721-7637  O 65721-7637  O 63138-1757  R O 63138-1757	County AUDRAIN Region 5  Telephone (417) 485-4185 Level of Care: RCF County CHRISTIAN Region 1  Telephone (314) 355-8833 Level of Care: ALF County SAINT LOUIS COUNTY Region 7  Telephone (314) 355-8833	DMH Licensed No Facility Number 24425  Alzheimer's Unit No Bed Capacity 12 DMH Licensed No Facility Number 24318  Alzheimer's Unit No Bed Capacity 38 DMH Licensed No
Mailing Address 1109 OLD FARM RD WE MEXICO MG  ESSEX OF OZARK, THE 5173 NORTH 22ND OZARK MG Mailing Address 5173 NORTH 22ND OZARK MG  ESTATES OF HIDDEN LAKE THE 11728 HIDDEN LAKE DR SAINT LOUIS MG Mailing Address 11728 HIDDEN LAKE DE SAINT LOUIS MG  ESTATES OF HIDDEN LAKE THE 11728 HIDDEN LAKE DE SAINT LOUIS MG  ESTATES OF HIDDEN LAKE THE 11728 HIDDEN LAKE THE 11728 HIDDEN LAKE DR SAINT LOUIS MG	O 65265-3250  O 65721-7637  O 65721-7637  O 63138-1757  O 63138-1757	County AUDRAIN Region 5  Telephone (417) 485-4185 Level of Care: RCF County CHRISTIAN Region 1  Telephone (314) 355-8833 Level of Care: ALF County SAINT LOUIS COUNTY Region 7  Telephone (314) 355-8833 Level of Care: SNF	DMH Licensed No Facility Number 24425  Alzheimer's Unit No Bed Capacity 12 DMH Licensed No Facility Number 24318  Alzheimer's Unit No Bed Capacity 38 DMH Licensed No Facility Number 18442  Alzheimer's Unit No Bed Capacity 38 DMH Licensed No Facility Number 18462
Mailing Address 1109 OLD FARM RD WE MEXICO MG  ESSEX OF OZARK, THE 5173 NORTH 22ND OZARK MG  Mailing Address 5173 NORTH 22ND OZARK MG  ESTATES OF HIDDEN LAKE THE 11728 HIDDEN LAKE DR SAINT LOUIS MG  Mailing Address 11728 HIDDEN LAKE DE SAINT LOUIS MG  ESTATES OF HIDDEN LAKE THE 11728 HIDDEN LAKE DE SAINT LOUIS MG  MAILING ADDRESS MG  MG  MG  MAILING ADDRESS MG	O 65265-3250  O 65721-7637  O 65721-7637  O 63138-1757  O 63138-1757	County AUDRAIN Region 5  Telephone (417) 485-4185 Level of Care: RCF County CHRISTIAN Region 1  Telephone (314) 355-8833 Level of Care: ALF County SAINT LOUIS COUNTY Region 7  Telephone (314) 355-8833	DMH Licensed No Facility Number 24425  Alzheimer's Unit No Bed Capacity 12 DMH Licensed No Facility Number 24318  Alzheimer's Unit No Bed Capacity 38 DMH Licensed No Facility Number 18442  Alzheimer's Unit No

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ESTATES OF HIDDEN LAKE THE			
11728 HIDDEN LAKE DR		<b>Telephone</b> (314) 355-8833	Alzheimer's Unit No
SAINT LOUIS	MO 63138-1757	Level of Care: ALF**	<b>Bed Capacity</b> 38
Mailing Address 11728 HIDDEN LAK	E DR	County SAINT LOUIS COUNTY	<b>DMH Licensed</b> No
SAINT LOUIS	MO 63138-1757	Region 7	Facility Number 18442
ESTATES OF PERRYVILLE, LLC, 7	THE		
430 NORTH WEST ST	THE	<b>Telephone</b> (573) 547-1011	Alzheimer's Unit No
PERRYVILLE	MO 63775-1359	Level of Care: SNF	Bed Capacity 156
Mailing Address 430 NORTH WEST S		County PERRY	DMH Licensed No
PERRYVILLE	MO 63775-1359	Region 2 Medicare/Medicaid	Facility Number 00137
I LIKK I VILLE	WO 03773-1337	Region 2 Medicare/Medicaid	racinty Number 00137
ESTATES OF SPANISH LAKE, THE	Σ		
610 PRIGGE ROAD		<b>Telephone</b> (314) 741-9393	Alzheimer's Unit No
SAINT LOUIS	MO 63138-3543	Level of Care: SNF	<b>Bed Capacity</b> 150
Mailing Address 610 PRIGGE ROAD		<b>County</b> SAINT LOUIS COUNTY	<b>DMH Licensed</b> No
SAINT LOUIS	MO 63138-3543	Region 7 Medicare/Medicaid	Facility Number 15265
ESTATES OF ST LOUIS, LLC, THE			
2115 KAPPEL DR		<b>Telephone</b> (314) 867-7474	Alzheimer's Unit No
SAINT LOUIS	MO 63136-4115	Level of Care: SNF	Bed Capacity 94
Mailing Address 2115 KAPPEL DR		County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS	MO 63136-4115	Region 7 Medicare/Medicaid	Facility Number 05340
S.M. Zoelb		region / Wedicare/Medicard	Tacinty Number 03340
FAIR VIEW HEALTH CARE CENT	ER		
1714 W 16TH ST		<b>Telephone</b> (660) 827-1594	Alzheimer's Unit No
SEDALIA	MO 65301-5273	Level of Care: SNF	Bed Capacity 75
Mailing Address 1714 W 16TH ST	150 55004 5050	County PETTIS	DMH Licensed No
SEDALIA	MO 65301-5273	Region 6 Medicare/Medicaid	Facility Number 02469
FAIRMONT ON CLAYTON			
7920 CLAYTON ROAD		<b>Telephone</b> (314) 646-7600	Alzheimer's Unit Yes
RICHMOND HEIGHTS	MO 63117-1327	Level of Care: ICF	<b>Bed Capacity</b> 90
Mailing Address 7920 CLAYTON RO	AD	County SAINT LOUIS COUNTY	<b>DMH Licensed</b> No
RICHMOND HEIGHTS	MO 63117-1327	Region 7	Facility Number 24149
FAMILY COUNSELING CENTER II	NC		
18408 WAYNE ROUTE D		<b>Telephone</b> (573) 222-8676	Alzheimer's Unit No
WAPPAPELLO	MO 63966-	Level of Care: RCF*	Bed Capacity 27
Mailing Address 18408 WAYNE ROU		County WAYNE	DMH Licensed Yes
WAPPAPELLO	MO 63966-	Region 2	Facility Number 23584
FAMILY PARTNERS MANCHESTE	TR II C		
351 FOREST SUMMIT COURT	II, LLC	<b>Telephone</b> (314) 686-4468	Alzheimer's Unit Yes
MANCHESTER MANCHESTER	MO 63021-5509	Level of Care: ALF**	Bed Capacity 42
Mailing Address 351 FOREST SUMM		County SAINT LOUIS COUNTY	DMH Licensed No
MANCHESTER	MO 63021-5509	Region 7	Facility Number 32473
	00021 0007	region ,	32773

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FARMINGTON ASSISTED LIVING	CENTER LLC			
2879 US HIGHWAY 67		<b>Telephone</b> (573) 756-7566	Alzheimer's Unit	No
FARMINGTON	MO 63640-9168	Level of Care: ALF	<b>Bed Capacity</b>	70
Mailing Address 2879 US HWY 67		County SAINT FRANCOIS	DMH Licensed	Yes
FARMINGTON	MO 63640-9168	Region 2	Facility Number	15140
	IANOD			
FARMINGTON PRESBYTERIAN M	ANOR	m 1 1 (572) 757 (770)	A1.1. *	NI-
500 CAYCE ST FARMINGTON	MO 63640-2910	Telephone (573) 756-6768 Level of Care: ALF	Alzheimer's Unit	No 60
	MO 03040-2910		Bed Capacity	No
Mailing Address 500 CAYCE ST FARMINGTON	MO 62640 2010	•	DMH Licensed	
FARMINGTON	MO 63640-2910	Region 2	Facility Number	06181
FARMINGTON PRESBYTERIAN M	ANOR			
500 CAYCE ST		<b>Telephone</b> (573) 756-6768	Alzheimer's Unit	Yes
FARMINGTON	MO 63640-2910	Level of Care: SNF	Bed Capacity	90
Mailing Address 500 CAYCE ST		County SAINT FRANCOIS	DMH Licensed	No
FARMINGTON	MO 63640-2910	Region 2 Medicare/Medicaid	Facility Number	06181
FARMINGTON PRESBYTERIAN M	ANOR			
500 CAYCE ST		<b>Telephone</b> (573) 756-6768	Alzheimer's Unit	No
FARMINGTON	MO 63640-2910	Level of Care: RCF	<b>Bed Capacity</b>	60
Mailing Address 500 CAYCE ST		County SAINT FRANCOIS	DMH Licensed	No
FARMINGTON	MO 63640-2910	Region 2	Facility Number	06181
FERNDALE, INC				
15677 COUNTY RD 2430		<b>Telephone</b> (573) 265-3344	Alzheimer's Unit	No
SAINT JAMES	MO 65559-8210	Level of Care: ALF	Bed Capacity	32
Mailing Address 15677 COUNTY RD		County PHELPS	DMH Licensed	Yes
SAINT JAMES	MO 65559-8210	Region 6	Facility Number	02526
		Trogram :		02020
Transia Marka				
FESTUS MANOR		T. 1 (626) 021 0066	A1 1 1	N
627 WESTWOOD DR S	140 - 50000 00 50	<b>Telephone</b> (636) 931-9066	Alzheimer's Unit	No
FESTUS	MO 63028-2062	Level of Care: SNF	Bed Capacity	150
Mailing Address 627 WESTWOOD DE		County JEFFERSON	DMH Licensed	No
FESTUS	MO 63028-2062	Region 2 Medicare/Medicaid	Facility Number	02546
FIELD POINTE ASSISTED LIVING	BY AMERICARE			
5002 GENE FIELD ROAD		<b>Telephone</b> (816) 688-4001	Alzheimer's Unit	Yes
SAINT JOSEPH	MO 64506-2056	Level of Care: ALF**	Bed Capacity	65
Mailing Address 5002 GENE FIELD R	OAD	County BUCHANAN	DMH Licensed	No
SAINT JOSEPH	MO 64506-2056	Region 4	Facility Number	32538
FIESER NURSING CENTER				
404 MAIN ST		<b>Telephone</b> (636) 343-4344	Alzheimer's Unit	No
FENTON	MO 63026-4107	Level of Care: SNF	Bed Capacity	60
Mailing Address 404 MAIN ST		County SAINT LOUIS COUNTY	DMH Licensed	No
FENTON	MO 63026-4107	Region 7 Medicaid	Facility Number	02569

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FLORISSANT VALLEY HEALTH &	REHABILITATION CENTER		
1200 GRAHAM RD		<b>Telephone</b> (314) 838-6555	Alzheimer's Unit No
FLORISSANT	MO 63031-8015	Level of Care: SNF	<b>Bed Capacity</b> 98
Mailing Address 1200 GRAHAM RD		County SAINT LOUIS COUNTY	DMH Licensed No
FLORISSANT	MO 63031-8015	Region 7 Medicare/Medicaid	Facility Number 00154
PODGWEN GADE GENEED			
FORSYTH CARE CENTER		m 1 1 (417) 546 (227	
477 COY BLVD	MO (5652 5122	<b>Telephone</b> (417) 546-6337	Alzheimer's Unit No
FORSYTH	MO 65653-5132	Level of Care: SNF	Bed Capacity 120
Mailing Address PO BOX 640	MO (5652 0640	County TANEY	DMH Licensed No
FORSYTH	MO 65653-0640	Region 1 Medicare/Medicaid	Facility Number 18870
FOUNTAINBLEAU LODGE			
2001 NORTH KINGSHIGHWAY		<b>Telephone</b> (573) 335-1999	Alzheimer's Unit No
CAPE GIRARDEAU	MO 63701-2193	Level of Care: ALF	Bed Capacity 56
Mailing Address 2001 NORTH KINGS	HIGHWAY	County CAPE GIRARDEAU	DMH Licensed No
CAPE GIRARDEAU	MO 63701-2193	Region 2	Facility Number 12751
EQUINTA INDI EALL ODGE			
FOUNTAINBLEAU LODGE		T. 1 1 (572) 225 1000	All the No.
2001 NORTH KINGSHIGHWAY	MO (2701 2102	<b>Telephone</b> (573) 335-1999	Alzheimer's Unit No
CAPE GIRARDEAU	MO 63701-2193	Level of Care: SNF	Bed Capacity 33
Mailing Address 2001 NORTH KINGS		County CAPE GIRARDEAU	DMH Licensed No
CAPE GIRARDEAU	MO 63701-2193	Region 2 Medicare/Medicaid	Facility Number 12751
FOUNTAINBLEAU NURSING CENT	TER		
1349 HIGHWAY 61		<b>Telephone</b> (636) 937-3500	Alzheimer's Unit No
FESTUS	MO 63028-4107	Level of Care: SNF	Bed Capacity 106
Mailing Address PO BOX 700		County JEFFERSON	<b>DMH Licensed</b> No
FESTUS	MO 63028-0700	Region 2 Medicare/Medicaid	Facility Number 17080
EQUINTAINS OF WEST COUNTY AT	I IIC THE		
FOUNTAINS OF WEST COUNTY AT 15822 CLAYTON RD	L, LLC THE	<b>Telephone</b> (636) 220-1660	Alzheimer's Unit Yes
ELLISVILLE	MO 63011-2240	Level of Care: ALF**	Bed Capacity 80
Mailing Address 15822 CLAYTON RD		County SAINT LOUIS COUNTY	DMH Licensed No
ELLISVILLE	MO 63011-2240	Region 7	Facility Number 29435
ELLIS VILLE	WO 03011-2240	Region /	Pacifity Number 29433
FOUR SEASONS ASSISTED LIVING	<b>;</b>		
230 RAILROAD ST		<b>Telephone</b> (636) 366-4231	Alzheimer's Unit No
MOSCOW MILLS	MO 63362-1600	Level of Care: ALF	Bed Capacity 30
Mailing Address 230 RAILROAD ST		County LINCOLN	DMH Licensed Yes
MOSCOW MILLS	MO 63362-1600	Region 5	Facility Number 02624
EQUID CEACONG I MINO GENTERS			
FOUR SEASONS LIVING CENTER 2800 HIGHWAY TT		Tolonhono (660) 926 9902	Alzheimer's Unit Yes
SEDALIA	MO 65301-1410	Telephone (660) 826-8803 Level of Care: SNF	Alzheimer's Unit Yes Bed Capacity 239
Mailing Address 2800 HIGHWAY TT	WIO 03301-1410	County PETTIS	
	MO 65301 1410		
SEDALIA	MO 65301-1410	Region 6 Medicare/Medicaid	Facility Number 00836

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FOUR SEASONS RCF I				
220 RAILROAD ST		T-l (626) 266 4221	Alzheimer's Unit	NT-
	MO 62262 1600	<b>Telephone</b> (636) 366-4231		No
MOSCOW MILLS	MO 63362-1600	Level of Care: RCF	Bed Capacity	23
Mailing Address 230 RAILROAD ST	MO 62262 1600	County LINCOLN	DMH Licensed	Yes
MOSCOW MILLS	MO 63362-1600	Region 5	Facility Number	02624
FOXBERRY TERRACE - ASSISTED	LIVING BY AMERICARE			
4316 NORTH ST LOUIS AVE	EIVING BI MALEMENTE	<b>Telephone</b> (417) 625-1000	Alzheimer's Unit	Yes
WEBB CITY	MO 64870-9550	Level of Care: ALF**	Bed Capacity	46
Mailing Address 4316 NORTH ST LO		County JASPER	DMH Licensed	No
WEBB CITY	MO 64870-9550	Region 1	Facility Number	25428
WEDD CITT	1410 04070 7330	region 1	racinty Number	23426
FOXWOOD SPRINGS LIVING CEN	TER			
1500 WEST FOXWOOD DR		<b>Telephone</b> (816) 331-3111	Alzheimer's Unit	Yes
RAYMORE	MO 64083-9347	Level of Care: SNF	<b>Bed Capacity</b>	108
Mailing Address 1500 WEST FOXWO	OOD DR	County CASS	DMH Licensed	No
RAYMORE	MO 64083-9347	Region 3 Medicare/Medicaid	Facility Number	02649
FOXWOOD SPRINGS LIVING CEN	TER			
1500 WEST FOXWOOD DR		<b>Telephone</b> (816) 331-3111	Alzheimer's Unit	No
RAYMORE	MO 64083-9347	Level of Care: ALF**	Bed Capacity	62
Mailing Address 1500 WEST FOXWO		County CASS	DMH Licensed	No
RAYMORE	MO 64083-9347	Region 3	Facility Number	02649
FREDERICK STREET MANOR				
429 NORTH FREDERICK STREET		<b>Telephone</b> (573) 334-2662	Alzheimer's Unit	No
CAPE GIRARDEAU	MO 63701-4834	Level of Care: RCF*	Bed Capacity	32
Mailing Address 429 NORTH FREDE		County CAPE GIRARDEAU	DMH Licensed	Yes
CAPE GIRARDEAU				
	MO 63701-4834	Region 2	Facility Number	02662
	MO 63701-4834	Region 2	Facility Number	02662
FREMONT SENIOR LIVING, THE	MO 63701-4834	·	·	
FREMONT SENIOR LIVING, THE 1520 EAST BATES ST	MO 63701-4834	<b>Region</b> 2 <b>Telephone</b> (417) 881-0500	Facility Number  Alzheimer's Unit	02662 Yes
· · · · · · · · · · · · · · · · · · ·	MO 63701-4834 MO 65804-8401		·	
1520 EAST BATES ST	MO 65804-8401	<b>Telephone</b> (417) 881-0500	Alzheimer's Unit Bed Capacity DMH Licensed	Yes
1520 EAST BATES ST SPRINGFIELD	MO 65804-8401	Telephone (417) 881-0500 Level of Care: ALF**	Alzheimer's Unit Bed Capacity	Yes 72
1520 EAST BATES ST SPRINGFIELD Mailing Address 1520 EAST BATES S SPRINGFIELD	MO 65804-8401 ST MO 65804-8401	Telephone (417) 881-0500 Level of Care: ALF** County GREENE	Alzheimer's Unit Bed Capacity DMH Licensed	Yes 72 No
1520 EAST BATES ST SPRINGFIELD Mailing Address 1520 EAST BATES S SPRINGFIELD FRIENDSHIP VILLAGE ASSISTED	MO 65804-8401 ST MO 65804-8401	Telephone (417) 881-0500 Level of Care: ALF** County GREENE Region 1	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	Yes 72 No 28782
1520 EAST BATES ST SPRINGFIELD Mailing Address 1520 EAST BATES S SPRINGFIELD  FRIENDSHIP VILLAGE ASSISTED 12777 POINTE DR	MO 65804-8401 ST MO 65804-8401 LIVING & MEMORY CARE	Telephone (417) 881-0500 Level of Care: ALF** County GREENE Region 1  Telephone (314) 270-7111	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit	Yes 72 No 28782 Yes
1520 EAST BATES ST SPRINGFIELD Mailing Address 1520 EAST BATES S SPRINGFIELD  FRIENDSHIP VILLAGE ASSISTED 12777 POINTE DR SAINT LOUIS	MO 65804-8401 ST MO 65804-8401	Telephone (417) 881-0500 Level of Care: ALF** County GREENE Region 1  Telephone (314) 270-7111 Level of Care: ALF**	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	Yes 72 No 28782 Yes 84
1520 EAST BATES ST SPRINGFIELD Mailing Address 1520 EAST BATES S SPRINGFIELD  FRIENDSHIP VILLAGE ASSISTED 12777 POINTE DR SAINT LOUIS Mailing Address 12777 POINTE DR	MO 65804-8401 ST MO 65804-8401  LIVING & MEMORY CARE MO 63127-1757	Telephone (417) 881-0500 Level of Care: ALF** County GREENE Region 1  Telephone (314) 270-7111 Level of Care: ALF** County SAINT LOUIS COUNTY	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	Yes 72 No 28782 Yes 84 No
1520 EAST BATES ST SPRINGFIELD Mailing Address 1520 EAST BATES S SPRINGFIELD  FRIENDSHIP VILLAGE ASSISTED 12777 POINTE DR SAINT LOUIS	MO 65804-8401 ST MO 65804-8401 LIVING & MEMORY CARE	Telephone (417) 881-0500 Level of Care: ALF** County GREENE Region 1  Telephone (314) 270-7111 Level of Care: ALF**	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	Yes 72 No 28782 Yes 84
1520 EAST BATES ST SPRINGFIELD Mailing Address 1520 EAST BATES S SPRINGFIELD  FRIENDSHIP VILLAGE ASSISTED 12777 POINTE DR SAINT LOUIS Mailing Address 12777 POINTE DR	MO 65804-8401 ST MO 65804-8401  LIVING & MEMORY CARE MO 63127-1757  MO 63127-1757	Telephone (417) 881-0500 Level of Care: ALF** County GREENE Region 1  Telephone (314) 270-7111 Level of Care: ALF** County SAINT LOUIS COUNTY	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	Yes 72 No 28782 Yes 84 No
1520 EAST BATES ST SPRINGFIELD Mailing Address 1520 EAST BATES S SPRINGFIELD  FRIENDSHIP VILLAGE ASSISTED 12777 POINTE DR SAINT LOUIS Mailing Address 12777 POINTE DR SAINT LOUIS	MO 65804-8401  ST  MO 65804-8401  LIVING & MEMORY CARE  MO 63127-1757  MO 63127-1757  LIVING & MEMORY CARE	Telephone (417) 881-0500 Level of Care: ALF** County GREENE Region 1  Telephone (314) 270-7111 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (636) 733-0199	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	Yes 72 No 28782 Yes 84 No
1520 EAST BATES ST SPRINGFIELD Mailing Address 1520 EAST BATES S SPRINGFIELD  FRIENDSHIP VILLAGE ASSISTED 12777 POINTE DR SAINT LOUIS Mailing Address 12777 POINTE DR SAINT LOUIS  FRIENDSHIP VILLAGE ASSISTED 15250 VILLAGE VIEW DRIVE CHESTERFIELD	MO 65804-8401  ST  MO 65804-8401  LIVING & MEMORY CARE  MO 63127-1757  MO 63127-1757  LIVING & MEMORY CARE  MO 63017-1982	Telephone (417) 881-0500 Level of Care: ALF** County GREENE Region 1  Telephone (314) 270-7111 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	Yes 72 No 28782 Yes 84 No 02703
1520 EAST BATES ST SPRINGFIELD Mailing Address 1520 EAST BATES S SPRINGFIELD  FRIENDSHIP VILLAGE ASSISTED 12777 POINTE DR SAINT LOUIS Mailing Address 12777 POINTE DR SAINT LOUIS FRIENDSHIP VILLAGE ASSISTED 15250 VILLAGE VIEW DRIVE	MO 65804-8401  ST  MO 65804-8401  LIVING & MEMORY CARE  MO 63127-1757  MO 63127-1757  LIVING & MEMORY CARE  MO 63017-1982	Telephone (417) 881-0500 Level of Care: ALF** County GREENE Region 1  Telephone (314) 270-7111 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (636) 733-0199	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	Yes 72 No 28782 Yes 84 No 02703

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FRIENDSHIP VILLAGE CHESTER	FIELD		
15250 VILLAGE VIEW DRIVE		<b>Telephone</b> (636) 733-0199	Alzheimer's Unit No
CHESTERFIELD	MO 63017-1982	Level of Care: SNF	<b>Bed Capacity</b> 90
Mailing Address 15250 VILLAGE VIE	EW DRIVE	County SAINT LOUIS COUNTY	<b>DMH Licensed</b> No
CHESTERFIELD	MO 63017-1982	Region 7 Medicare/Medicaid	Facility Number 02715
FRIENDSHIP VILLAGE SUNSET H	птс		
12651 VILLAGE CIRCLE DR	IILLS	<b>Telephone</b> (314) 270-7777	Alzheimer's Unit No
SAINT LOUIS	MO 63127-1778	Telephone (314) 270-7777  Level of Care: SNF	
			Bed Capacity 144  DMH Licensed No
Mailing Address 12651 VILLAGE CIR SAINT LOUIS	MO 63127-1778	• • • •	
SAINI LOUIS	MO 03127-1778	Region 7 Medicare/Medicaid	Facility Number 02703
FULTON MANOR CARE CENTER			
520 MANOR DR		<b>Telephone</b> (573) 642-6834	Alzheimer's Unit No
FULTON	MO 65251-2429	Level of Care: SNF	<b>Bed Capacity</b> 52
Mailing Address 520 MANOR DR		<b>County</b> CALLAWAY	DMH Licensed No
FULTON	MO 65251-2429	Region 6 Medicare/Medicaid	Facility Number 02725
ELII TONI MIDOINO O DENIAD			
FULTON NURSING & REHAB		TO 1 1 (572) (42 0202	All to the War
1510 BLUFF ST FULTON	MO 65251-2345	Telephone (573) 642-0202 Level of Care: SNF	Alzheimer's Unit Yes Bed Canacity 100
	MO 63231-2343		
Mailing Address 1510 BLUFF ST FULTON	MO 65251 2245	• • • •	
FULION	MO 65251-2345	Region 6 Medicare/Medicaid	Facility Number 03492
GABLES AT BRADY CIRCLE, LLC	THE		
11 BRADY CIRCLE		<b>Telephone</b> (314) 890-2230	Alzheimer's Unit No
SAINT LOUIS	MO 63114-1110	<b>Level of Care:</b> ALF**	<b>Bed Capacity</b> 40
Mailing Address 11 BRADY CIRCLE		County SAINT LOUIS COUNTY	<b>DMH Licensed</b> No
SAINT LOUIS	MO 63114-1110	Region 7	Facility Number 30048
GAINESVILLE NURSING			
77 MEDICAL DR		<b>Telephone</b> (417) 679-4921	Alzheimer's Unit No
GAINESVILLE	MO 65655-0628	Level of Care: SNF	<b>Bed Capacity</b> 99
Mailing Address PO BOX 628		County OZARK	DMH Licensed No
GAINESVILLE	MO 65655-0628	Region 1 Medicare/Medicaid	Facility Number 12868
CADDEN DI AZA OE EL ODICCANT	,		
GARDEN PLAZA OF FLORISSANT		Talanhana (214) 921 0099	Alabaimania IIvit
1101 GARDEN PLAZA DR	MO 62022 2260	Telephone (314) 831-0988	Alzheimer's Unit Yes
FLORISSANT  Moiling Address 1101 GARDEN DLA	MO 63033-2269	Level of Care: ALF**	Bed Capacity 102  DMH Licensed No
Mailing Address 1101 GARDEN PLAZ		County SAINT LOUIS COUNTY	
FLORISSANT	MO 63033-2269	Region 7	Facility Number 27826
GARDEN VIEW CARE CENTER			
700 GARDEN PATH		<b>Telephone</b> (636) 240-2840	Alzheimer's Unit YES
O'FALLON	MO 63366-3052	Level of Care: SNF	<b>Bed Capacity</b> 120
Mailing Address 700 GARDEN PATH		County SAINT CHARLES	<b>DMH Licensed</b> No
O'FALLON	MO 63366-3052	Region 5 Medicare/Medicaid	Facility Number 13963

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GARDEN VIEW CARE CENTER AT	DOUGHERTY FERRY			
13612 BIG BEND RD		<b>Telephone</b> (636) 861-0500	Alzheimer's Unit	Yes
VALLEY PARK	MO 63088-1447	Level of Care: SNF	Bed Capacity	120
Mailing Address 13612 BIG BEND RE		County SAINT LOUIS COUNTY	DMH Licensed	No
VALLEY PARK	MO 63088-1447	Region 7 Medicare/Medicaid	Facility Number	23101
GARDEN VIEW CARE CENTER OF	CHESTERFIELD			
1025 CHESTERFIELD POINTE PRKW	Υ	<b>Telephone</b> (636) 537-3333	Alzheimer's Unit	Yes
CHESTERFIELD	MO 63017-1957	Level of Care: SNF	Bed Capacity	130
Mailing Address 1025 CHESTERFIEL	D POINTE PRKWY	County SAINT LOUIS COUNTY	DMH Licensed	No
CHESTERFIELD	MO 63017-1957	Region 7 Medicare/Medicaid	Facility Number	16409
GARDEN VILLAS				
13590 SOUTH OUTER 40 RD		<b>Telephone</b> (314) 434-2520	Alzheimer's Unit	No
TOWN AND COUNTRY	MO 63017-5823	Level of Care: ALF**	Bed Capacity	46
Mailing Address 13590 SOUTH OUTE		County SAINT LOUIS COUNTY	DMH Licensed	No
TOWN AND COUNTRY	MO 63017-5823	Region 7	Facility Number	28978
TOWNING COCKING	110 0301, 3023	Region /	Tuelley Tulliper	20770
GARDEN VILLAS NORTH				
4505 PARKER ROAD		<b>Telephone</b> (314) 355-6100	Alzheimer's Unit	No
BLACK JACK	MO 63033-4268	Level of Care: ALF**	Bed Capacity	90
Mailing Address 4505 PARKER RD	1.00 (0.000 10.00	County SAINT LOUIS COUNTY	DMH Licensed	No
BLACK JACK	MO 63033-4268	Region 7	Facility Number	28930
GARDEN VILLAS OF O'FALLON				
7092 SOUTH OUTER 364 ROAD		<b>Telephone</b> (636) 240-5560	Alzheimer's Unit	No
O'FALLON	MO 63368-7757	Level of Care: ALF	Bed Capacity	95
Mailing Address 7092 SOUTH OUTER		County SAINT CHARLES	DMH Licensed	No
O'FALLON	MO 63368-7757	Region 5	Facility Number	27793
GARDEN VILLAS SOUTH				
13457 TESSON FERRY RD		<b>Telephone</b> (314) 843-7788	Alzheimer's Unit	No
SAINT LOUIS	MO 63128-4010	Level of Care: ALF	Bed Capacity	83
Mailing Address 13457 TESSON FER	RY RD	County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63128-4010	Region 7	Facility Number	28964
GARDENS AT BARRY ROAD, THE				
8300 NW BARRY ROAD		<b>Telephone</b> (816) 584-3200	Alzheimer's Unit	No
KANSAS CITY	MO 64153-1634	Level of Care: ALF	Bed Capacity	100
Mailing Address 8300 NW BARRY RI	D	County PLATTE	DMH Licensed	No
KANSAS CITY	MO 64153-1634	Region 4	Facility Number	23774
GARDENS AT BARRY ROAD, THE				
8300 NW BARRY RD		<b>Telephone</b> (816) 584-3200	Alzheimer's Unit	Yes
KANSAS CITY	MO 64153-1634	Level of Care: ALF**	Bed Capacity	40
Mailing Address 8300 NW BARRY RI		County PLATTE	DMH Licensed	No
KANSAS CITY	MO 64153-1634	Region 4	Facility Number	23774
		<b>8</b> ····		

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GARDENS, THE				
1302 WEST SUNSET		<b>Telephone</b> (417) 889-7600	Alzheimer's Unit	Yes
SPRINGFIELD	MO 65807-5943	Level of Care: ALF**	Bed Capacity	148
Mailing Address 1302 WEST SUNSET		County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65807-5943	Region 1	Facility Number	20288
a lacovine Milano Mena	0.00			
GASCONADE MANOR NURSING HO	OME	m 1 1 (572) 427 4101		N
1910 NURSING HOME RD	110 55055 2044	<b>Telephone</b> (573) 437-4101	Alzheimer's Unit	No
OWENSVILLE	MO 65066-2844	Level of Care: SNF	Bed Capacity	79
Mailing Address PO BOX 520	110 (5066 0520	County GASCONADE	DMH Licensed	No
OWENSVILLE	MO 65066-0520	Region 6 Medicare/Medicaid	Facility Number	02804
GASCONADE TERRACE RETIREM	ENT CENTER			
1930 NURSING HOME RD	En Center	<b>Telephone</b> (573) 437-4833	Alzheimer's Unit	No
OWENSVILLE	MO 65066-2844	Level of Care: ALF	Bed Capacity	19
Mailing Address PO BOX 520	WO 03000-2044	County GASCONADE	DMH Licensed	No
OWENSVILLE	MO 65066-0520	Region 6	Facility Number	14143
OWENS VILLE	WO 03000-0320	Region 0	Facility Number	14143
GEORGIA BROWN BLOSSER HOM	E FOR THE AGED			
1210 EAST EASTWOOD ST		<b>Telephone</b> (660) 886-5022	Alzheimer's Unit	No
MARSHALL	MO 65340-1510	Level of Care: RCF	Bed Capacity	11
Mailing Address 1210 EAST EASTWO	OD ST	County SALINE	DMH Licensed	No
MARSHALL	MO 65340-1510	Region 5	Facility Number	00633
GEORGIAN GARDENS CENTER FO	OR REHAB AND HEALTHCARE			
1 GEORGIAN GARDENS DR		<b>Telephone</b> (573) 438-6261	Alzheimer's Unit	Yes
POTOSI	MO 63664-1436	Level of Care: SNF	Bed Capacity	120
Mailing Address 1 GEORGIAN GARD		County WASHINGTON	DMH Licensed	No
POTOSI	MO 63664-1436	Region 2 Medicare/Medicaid	Facility Number	02830
GIDEON CARE CENTER				
300 LUNBECK		<b>Telephone</b> (573) 448-3505	Alzheimer's Unit	Yes
GIDEON	MO 63848-9211	Level of Care: SNF	Bed Capacity	72
Mailing Address PO BOX 197	050.0 /211	County NEW MADRID	DMH Licensed	No
GIDEON	MO 63848-0197	Region 2 Medicare/Medicaid	Facility Number	15538
GIDLON	NIO 03040 0177	Region 2 Wedicare/Medicard	Taciney (vanise)	13336
GLASGOW GARDENS				
100 AUDSLEY DR		<b>Telephone</b> (660) 338-2297	Alzheimer's Unit	No
GLASGOW	MO 65254-9537	Level of Care: SNF	<b>Bed Capacity</b>	59
Mailing Address 100 AUDSLEY DR		County HOWARD	DMH Licensed	No
GLASGOW	MO 65254-9537	Region 5 Medicare/Medicaid	<b>Facility Number</b>	01659
GLENDALE GARDENS NURSING &	DEHAR			
3535 EAST CHEROKEE	, REHAD	<b>Telephone</b> (417) 889-9955	Alzheimer's Unit	No
SPRINGFIELD	MO 65809-2829	Level of Care: SNF	Bed Capacity	120
Mailing Address 3535 EAST CHEROK		County GREENE	DMH Licensed	No
Maning Audiess 3333 EAST CHERON	LL	County OKEENE	Diviti Licenseu	110

Region 1

Medicare/Medicaid

**Facility Number** 

16735

MO 65809-2829

SPRINGFIELD

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GLENFIELD MEMORY CARE 118 OHMES ROAD COTTLEVILLE MO 63		•	,	Alzheimer's Unit Bed Capacity	Yes 12
Mailing Address 118 OHMES RD COTTLEVILLE MO 63	Cou: Regi	nty SAINT ion 5		DMH Licensed Facility Number	No 30372
GLENWOOD HEALTHCARE 851 THOROUGHFARE	Tolo	nhono (	417) 935-2992	Alzheimer's Unit	Yes
			,	Bed Capacity	60
Mailing Address 851 THOROUGHFARE	Cou			DMH Licensed	No
				Facility Number	16944
GOGGIN BOARDING HOME LLC					
620 COUNTY ROAD 40		•	,	Alzheimer's Unit	No
***************************************				Bed Capacity	12
Mailing Address 620 COUNTY RD 40	Cou	•		DMH Licensed	Yes
CALEDONIA MO 63	Regi	ion 2		Facility Number	02937
GOLDEN AGE LIVING CENTER 404 E THIRD ST	Tala	phone (	573) 377-4521	Alzheimer's Unit	Yes
		_	*	Bed Capacity	61
Mailing Address PO BOX 307	Cou			DMH Licensed	No
			dicare/Medicaid	Facility Number	02949
GOLDEN AGE NURSING HOME					
12498 SE HWY 116		•	,	Alzheimer's Unit	No
				Bed Capacity	83
Mailing Address 12498 SE HWY 116	Cour	·		DMH Licensed	No
BRAYMER MO 64	1624-9107 <b>Regi</b>	ion 4 Me	dicare/Medicaid	Facility Number	02957
GOLDEN ESTATE RESIDENTIAL CARE 1134 WEST NORTON RD	Tele	phone (4	417) 833-4440	Alzheimer's Unit	No
		•	<i>'</i>	Bed Capacity	31
Mailing Address 1134 WEST NORTON RD	Com			DMH Licensed	Yes
		ion 1		Facility Number	02984
GOLDEN OAKS ASSISTED LIVING I LLC					
27882 HIGHWAY H		•	*	Alzheimer's Unit	No
				<b>Bed Capacity</b>	67
Mailing Address 27882 HIGHWAY H	Cou	•		DMH Licensed	No
MARSHALL MO 65	3340-5303 <b>Regi</b>	ion 5		Facility Number	15380
GOLDEN YEARS CENTER FOR REHAB AND		nhone (	916) 290 <i>4</i> 721	Alahaiman'a II-14	V
2001 JEFFERSON PARKWAY HARRISONVILLE MO 64		-	,	Alzheimer's Unit Bed Capacity	Yes 128
Mailing Address 2001 JEFFERSON PARKWAY				DMH Licensed	No
				Facility Number	12458
	Kegi				-2.50

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Telephone   GoOD SMARITAN CARR CENTER   Work of Same   S				
Column	GOOD SAMARITAN CARE CENTER	R		
Mailing Address 403 WEST MAIN ST   COLUR   Region   BENTON   DMIL Licensed   No colur   CASIN   COLE CAMP   MO 65325-1144   Region   Region   Facility Number   COLUR   CAMP   COLUR   CASIN   CASIN	403 WEST MAIN ST		<b>Telephone</b> (660) 668-4515	Alzheimer's Unit No
COOD SHEPHERD CARE CENTER	COLE CAMP	MO 65325-1144	Level of Care: SNF	<b>Bed Capacity</b> 72
COOD SHEPHERD CARE CENTER   1101 WEST CLAY RD			County BENTON	<b>DMH Licensed</b> No
IOI WEST CLAY RD	COLE CAMP	MO 65325-1144	Region 6 Medicare/Medicaid	Facility Number 03039
IOI WEST CLAY RD				
Versall Les	GOOD SHEPHERD CARE CENTER			
Mailling Address 1101 WEST CLAY RD	1101 WEST CLAY RD		• • • • • • • • • • • • • • • • • • • •	Alzheimer's Unit No
VERSAILLES	VERSAILLES	MO 65084-1177	Level of Care: SNF	Bed Capacity 120
COOD SHEPHERD COMMUNITY CARE AND REHABILITATION	_	D .	County MORGAN	<b>DMH Licensed</b> No
Telephome   (417) 232-4571   Alzheimer's Unit   Yes	VERSAILLES	MO 65084-1177	Region 6 Medicare/Medicaid	Facility Number 21631
Telephome   (417) 232-4571   Alzheimer's Unit   Yes				
Lockwood		ARE AND REHABILITATION	T-l (417) 222 4571	Al-beim out Tiet Ve
Mailing Address 200 WEST 12TH ST   County   DADE   DMH Licensed   No Octoor   No octoor		MO (5(0) 0227	• '	
COCKWOOD   MO 65682-8337   Region   Medicare/Medicaid   Facility Number   03051		MO 65682-8337		
COOD SHEPHERD RESIDENTIAL CARE FACILITY   200 WEST 12TH		MO (5(0) 0227	·	
Telephome   (417) 232-4571   Alzheimer's Unit   No	LOCKWOOD	MO 65682-8337	Region 1 Medicare/Medicaid	racinty Number 03051
Telephome   (417) 232-4571   Alzheimer's Unit   No	GOOD SHEPHERD RESIDENTIAL O	CARE FACILITY		
Lockwood			Telephone (417) 232-4571	Alzheimer's Unit No
Mailing Address 200 WEST 12TH LOCKWOOD         County MO 65682-8337         County Region 1         DMH Licensed Facility Number         No 3051           GOWER CONVALESCENT CENTER, INC 323 SOUTH HIGHWAY 169 GOWER         Telephone (816) 424-6483         Alzheimer's Unit MO 6450-9116         No 64454-9116         Level of Care: SNF Bed Capacity 82 Bed Capacity 82 Mailing Address PO BOX 170         No 64454-9170         No 64454-9170         DMH Licensed MO 6450-9104         No 64454-9170         No 76450         No 764500 <td< td=""><td></td><td>MO 65682-8337</td><td></td><td></td></td<>		MO 65682-8337		
COCKWOOD   MO 65682-8337   Region 1   Facility Number   03051		110 03002 0337		
GOWER CONVALESCENT CENTER, INC  323 SOUTH HIGHWAY 169	e e	MO 65682-8337		
Telephone   South Highway 169   Mo 64454-9116   Level of Care: SNF   Bed Capacity   82	Lockwood	110 03002 0337	Region 1	racinty runner 05051
GOWER	GOWER CONVALESCENT CENTER	R, INC		
Mailing Address PO BOX 170 GOWER  MO 64454-0170  Region 4  Medicare/Medicaid  Facility Number  03107  GRAN VILLAS NEOSHO  420 LYON DR  NEOSHO  MO 64850-9194  Level of Care: RCF  Bed Capacity  30  Mailing Address 420 LYON DR  NEOSHO  MO 64850-9194  Region 1  Telephone  (417) 451-7071  Alzheimer's Unit  No  NEOSHO  MO 64850-9194  Region 1  Facility Number  20156  GRANBY HOUSE  301 SOUTH MAIN  GRANBY  MO 64844-8336  Level of Care: SNF  Bed Capacity  60  Mailing Address 301 SOUTH MAIN  GRANBY  MO 64844-8336  Region 1  Medicare/Medicaid  Facility Number  16481  GRANBY  GRANBY  MO 64844-8336  Region 1  Medicare/Medicaid  Facility Number  16481  GRAND MANOR HEALTH CARE CENTER  3645 COOK AVE  Telephone  (314) 531-2352  Alzheimer's Unit  No  SAINT LOUIS  MO 63113-3801  Level of Care: SNF  Bed Capacity  10  No  Mo 64844-836  Region 1  Medicare/Medicaid	323 SOUTH HIGHWAY 169		<b>Telephone</b> (816) 424-6483	Alzheimer's Unit No
GRAN VILLAS NEOSHO	GOWER	MO 64454-9116	Level of Care: SNF	<b>Bed Capacity</b> 82
GRAN VILLAS NEOSHO   420 LYON DR	Mailing Address PO BOX 170		County CLINTON	DMH Licensed No
Telephone   (417) 451-7071   Alzheimer's Unit   No     NEOSHO	GOWER	MO 64454-0170	Region 4 Medicare/Medicaid	Facility Number 03107
Telephone   (417) 451-7071   Alzheimer's Unit   No     NEOSHO				
NEOSHO         MO 64850-9194         Level of Care: RCF         Bed Capacity         30           Mailing Address 420 LYON DR         MO 64850-9194         County Region 1         NEWTON         DMH Licensed No           NEOSHO         MO 64850-9194         Region 1         Facility Number         20156           GRANBY HOUSE         301 SOUTH MAIN         Telephone (417) 472-6271         Alzheimer's Unit No         No           GRANBY         MO 64844-8336         Level of Care: SNF         Bed Capacity         60           Mailing Address 301 SOUTH MAIN         County NEWTON         DMH Licensed         No           GRANBY         MO 64844-8336         Region 1         Medicare/Medicaid         Facility Number         16481           GRAND MANOR HEALTH CARE CENTER           3645 COOK AVE         Telephone (314) 531-2352         Alzheimer's Unit         No           SAINT LOUIS         MO 63113-3801         Level of Care: SNF         Bed Capacity         120           Mailing Address 3645 COOK AVE         County SAINT LOUIS CITY         DMH Licensed         No			T. 1 (415) 451 5051	
Mailing Address 420 LYON DR NEOSHO MO 64850-9194 Region 1 Facility Number 20156  GRANBY HOUSE 301 SOUTH MAIN GRANBY MO 64844-8336 Level of Care: SNF Bed Capacity 60 Mailing Address 301 SOUTH MAIN GRANBY MO 64844-8336 Region 1 Medicare/Medicaid Facility Number 16481  GRAND MANOR HEALTH CARE CENTER 3645 COOK AVE Telephone (314) 531-2352 Alzheimer's Unit No SAINT LOUIS MO 63113-3801 Level of Care: SNF Bed Capacity 16481  Telephone (314) 531-2352 Alzheimer's Unit No SAINT LOUIS MO 63113-3801 Level of Care: SNF Bed Capacity 120 Mailing Address 3645 COOK AVE SAINT LOUIS SAINT LOUIS CITY DMH Licensed No		MO (4050 0104	• , ,	
NEOSHO         MO 64850-9194         Region 1         Facility Number         20156           GRANBY HOUSE         301 SOUTH MAIN         Telephone (417) 472-6271         Alzheimer's Unit No           GRANBY         MO 64844-8336         Level of Care: SNF         Bed Capacity         60           Mailing Address 301 SOUTH MAIN         County NEWTON         DMH Licensed         No           GRAND MANOR HEALTH CARE CENTER         3645 COOK AVE         Telephone (314) 531-2352         Alzheimer's Unit No           SAINT LOUIS         MO 63113-3801         Level of Care: SNF         Bed Capacity         120           Mailing Address 3645 COOK AVE         County SAINT LOUIS CITY         DMH Licensed         No		MO 64850-9194		- ·
GRANBY HOUSE           301 SOUTH MAIN         Telephone         (417) 472-6271         Alzheimer's Unit         No           GRANBY         MO 64844-8336         Level of Care:         SNF         Bed Capacity         60           Mailing Address 301 SOUTH MAIN         County         NEWTON         DMH Licensed         No           GRANBY         MO 64844-8336         Region 1         Medicare/Medicaid         Facility Number         16481           GRAND MANOR HEALTH CARE CENTER           3645 COOK AVE         Telephone         (314) 531-2352         Alzheimer's Unit         No           SAINT LOUIS         MO 63113-3801         Level of Care:         SNF         Bed Capacity         120           Mailing Address 3645 COOK AVE         County         SAINT LOUIS CITY         DMH Licensed         No	· ·	MO (4050 0104		
301 SOUTH MAIN         Telephone (417) 472-6271         Alzheimer's Unit         No           GRANBY         MO 64844-8336         Level of Care: SNF         Bed Capacity         60           Mailing Address 301 SOUTH MAIN         County         NEWTON         DMH Licensed         No           GRANBY         MO 64844-8336         Region 1         Medicare/Medicaid         Facility Number         16481           GRAND MANOR HEALTH CARE CENTER           3645 COOK AVE         Telephone         (314) 531-2352         Alzheimer's Unit         No           SAINT LOUIS         MO 63113-3801         Level of Care:         SNF         Bed Capacity         120           Mailing Address 3645 COOK AVE         County         SAINT LOUIS CITY         DMH Licensed         No	NEOSHO	MO 64850-9194	Region 1	Facility Number 20156
301 SOUTH MAIN         Telephone (417) 472-6271         Alzheimer's Unit         No           GRANBY         MO 64844-8336         Level of Care: SNF         Bed Capacity         60           Mailing Address 301 SOUTH MAIN         County         NEWTON         DMH Licensed         No           GRANBY         MO 64844-8336         Region 1         Medicare/Medicaid         Facility Number         16481           GRAND MANOR HEALTH CARE CENTER           3645 COOK AVE         Telephone         (314) 531-2352         Alzheimer's Unit         No           SAINT LOUIS         MO 63113-3801         Level of Care:         SNF         Bed Capacity         120           Mailing Address 3645 COOK AVE         County         SAINT LOUIS CITY         DMH Licensed         No	GRANBY HOUSE			
GRANBY         MO 64844-8336         Level of Care:         SNF         Bed Capacity         60           Mailing Address 301 SOUTH MAIN         County         NEWTON         DMH Licensed         No           GRANBY         MO 64844-8336         Region 1         Medicare/Medicaid         Facility Number         16481           GRAND MANOR HEALTH CARE CENTER           3645 COOK AVE         Telephone         (314) 531-2352         Alzheimer's Unit         No           SAINT LOUIS         MO 63113-3801         Level of Care:         SNF         Bed Capacity         120           Mailing Address 3645 COOK AVE         County         SAINT LOUIS CITY         DMH Licensed         No			<b>Telephone</b> (417) 472-6271	Alzheimer's Unit No
Mailing Address 301 SOUTH MAIN       County       NEWTON       DMH Licensed       No         GRANBY       MO 64844-8336       Region 1       Medicare/Medicaid       Facility Number       16481         GRAND MANOR HEALTH CARE CENTER         3645 COOK AVE       Telephone       (314) 531-2352       Alzheimer's Unit       No         SAINT LOUIS       MO 63113-3801       Level of Care:       SNF       Bed Capacity       120         Mailing Address 3645 COOK AVE       County       SAINT LOUIS CITY       DMH Licensed       No		MO 64844-8336	-	
GRANBY         MO 64844-8336         Region 1         Medicare/Medicaid         Facility Number         16481           GRAND MANOR HEALTH CARE CENTER           3645 COOK AVE         Telephone         (314) 531-2352         Alzheimer's Unit         No           SAINT LOUIS         MO 63113-3801         Level of Care:         SNF         Bed Capacity         120           Mailing Address 3645 COOK AVE         County         SAINT LOUIS CITY         DMH Licensed         No				
GRAND MANOR HEALTH CARE CENTER  3645 COOK AVE  Telephone (314) 531-2352 Alzheimer's Unit No SAINT LOUIS MO 63113-3801 Level of Care: SNF Bed Capacity 120  Mailing Address 3645 COOK AVE  County SAINT LOUIS CITY DMH Licensed No		MO 64844-8336	•	
3645 COOK AVETelephone(314) 531-2352Alzheimer's UnitNoSAINT LOUISMO 63113-3801Level of Care:SNFBed Capacity120Mailing Address 3645 COOK AVECountySAINT LOUIS CITYDMH LicensedNo		2.2		10401
SAINT LOUIS MO 63113-3801 <b>Level of Care:</b> SNF <b>Bed Capacity</b> 120 <b>Mailing Address</b> 3645 COOK AVE County SAINT LOUIS CITY <b>DMH Licensed</b> No	GRAND MANOR HEALTH CARE CI	ENTER		
Mailing Address 3645 COOK AVE         County         SAINT LOUIS CITY         DMH Licensed         No	3645 COOK AVE		<b>Telephone</b> (314) 531-2352	Alzheimer's Unit No
•	SAINT LOUIS	MO 63113-3801		<b>Bed Capacity</b> 120
SAINT LOUIS MO 63113-3801 Region 7 Medicare/Medicaid Facility Number 13324	Mailing Address 3645 COOK AVE		County SAINT LOUIS CITY	<b>DMH Licensed</b> No
	SAINT LOUIS	MO 63113-3801	Region 7 Medicare/Medicaid	Facility Number 13324

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GRAND RIVER HEALTH CARE 118 TRENTON RD CHILLICOTHE	MO 64601-4002	<b>Telephone</b> (660) 646-0353 <b>Level of Care:</b> SNF	Alzheimer's Unit Bed Capacity	No 60
Mailing Address 118 TRENTON RD		County LIVINGSTON	DMH Licensed	No
CHILLICOTHE	MO 64601-4002	Region 4 Medicare/Medicaid	Facility Number	16939
GRAND ROYALE, THE		(01 c) 200 4200		NO
2900 NE KENDALLWOOD PKWY	MO (4110 1021	<b>Telephone</b> (816) 280-4280	Alzheimer's Unit	NO 25
GLADSTONE 2000 NE KENDALIN	MO 64119-1831	Level of Care: ALF**	Bed Capacity	25 N-
Mailing Address 2900 NE KENDALLY	MO 64119-1831	County CLAY	DMH Licensed	No
GLADSTONE	MO 04119-1831	Region 4	Facility Number	03086
GRANDE AT CHESTERFIELD, THE				
16300 JUSTUS POST ROAD		<b>Telephone</b> (636) 778-4800	Alzheimer's Unit	Yes
CHESTERFIELD	MO 63017-4608	Level of Care: ALF**	Bed Capacity	95 N
Mailing Address 16300 JUSTUS POST		County SAINT LOUIS COUNTY	DMH Licensed	No
CHESTERFIELD	MO 63017-4608	Region 7	Facility Number	30848
GRANDE AT CREVE COEUR THE				
450 NORTH LINDBERGH BLVD		<b>Telephone</b> (314) 628-0004	Alzheimer's Unit	Yes
CREVE COEUR	MO 63141-7814	Level of Care: ALF**	Bed Capacity	58
Mailing Address 450 NORTH LINDBI		County SAINT LOUIS COUNTY	DMH Licensed	No
CREVE COEUR	MO 63141-7814	Region 7	Facility Number	30479
GRANDE AT LAUMEIER PARK TH	IE			
12470 ROTT ROAD		<b>Telephone</b> (314) 462-0222	Alzheimer's Unit	Yes
SUNSET HILLS	MO 63127-1247	Level of Care: ALF**	Bed Capacity	98
Mailing Address 12470 ROTT ROAD	MO (2127 1247	County SAINT LOUIS COUNTY	DMH Licensed	No
SUNSET HILLS	MO 63127-1247	Region 7	Facility Number	30466
GRANDVIEW HEALTHCARE CEN	TER			
201 GRAND AVE	MO (2000 1200	<b>Telephone</b> (636) 239-9190	Alzheimer's Unit	No
WASHINGTON	MO 63090-1209	Level of Care: SNF	Bed Capacity	102
Mailing Address 201 GRAND AVE	NO (2000 1200	County FRANKLIN	DMH Licensed	No
WASHINGTON	MO 63090-1209	Region 6 Medicare/Medicaid	Facility Number	15045
GRANITE HOUSE RCF LLC				
321 SOUTH MAIN ST		<b>Telephone</b> (573) 546-7283	Alzheimer's Unit	No
IRONTON	MO 63650-1406	Level of Care: RCF	Bed Capacity	60
Mailing Address PO BOX 6	MO (2(5) 02(5)	County IRON	DMH Licensed	Yes
IRONTON	MO 63650-0066	Region 2	Facility Number	04628
GREEN ACRES RESIDENTIAL CA	RE FACILITY, LLC			
3688 SAND CREEK ROAD	MO (2640 7250	<b>Telephone</b> (573) 756-2917	Alzheimer's Unit	No 12
FARMINGTON  Mailing Address 2699 SAND CREEK	MO 63640-7350	Level of Care: RCF	Bed Capacity	12 Vas
Mailing Address 3688 SAND CREEK FARMINGTON	MO 63640-7350	County SAINT FRANCOIS	DMH Licensed	Yes
FARMINGTON	WIO 05040-7550	Region 2	Facility Number	17289

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annum 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1			
GREENVILLE HEALTH CARE CE	NTER	T-l (572) 224 2200	Allahainnanta Kinis
117 SYCAMORE ST GREENVILLE	MO 63944-0000	Telephone (573) 224-3298 Level of Care: SNF	Alzheimer's Unit No Bed Capacity 60
	MO 03944-0000		Bed Capacity 60  DMH Licensed No
Mailing Address PO BOX 108 GREENVILLE	MO 63944-0108		Facility Number 15550
OREENVILLE	WIO 03944-0108	Region 2 Medicare/Medicaid	Facility Number 15550
GREGORY RIDGE HEALTH CARE	CENTER		
7001 CLEVELAND AVE	CENTER	<b>Telephone</b> (816) 333-0700	Alzheimer's Unit No
KANSAS CITY	MO 64132-1622	Level of Care: SNF	Bed Capacity 116
Mailing Address 7001 CLEVELAND		County JACKSON	DMH Licensed No
KANSAS CITY	MO 64132-1622	Region 3 Medicare/Medicaid	Facility Number 04109
WANTED VIOLET PROPERTY A	CARE		
HAMPTON HOUSE RESIDENTIAL	CARE	T-1	A 1-1
201 N DECATUR STREET	MO (29(2-2017	Telephone (573) 276-6054	Alzheimer's Unit No
MALDEN	MO 63863-2017	Level of Care: RCF*	Bed Capacity 22
Mailing Address 201 N DECATUR ST		County DUNKLIN	DMH Licensed Yes
MALDEN	MO 63863-2017	Region 2	Facility Number 03331
HAMPTON MANOR OF WENTZVI	LLE		
21 MIDLAND PARK DR		<b>Telephone</b> (636) 538-6700	Alzheimer's Unit Yes
WENTZVILLE	MO 63385-8100	Level of Care: ALF**	<b>Bed Capacity</b> 85
Mailing Address 21 MIDLAND PARK	DR	County SAINT CHARLES	DMH Licensed No
WENTZVILLE	MO 63385-8100	Region 5	Facility Number 33289
		S	·
HARAMBEE HOUSE, INC			
703 NORTH EIGHTH ST		<b>Telephone</b> (573) 443-6972	Alzheimer's Unit No
COLUMBIA	MO 65201-4516	Level of Care: RCF*	Bed Capacity 15
Mailing Address 703 NORTH EIGHTE		County BOONE	DMH Licensed Yes
COLUMBIA	MO 65201-4516	Region 6	Facility Number 17197
HARBOR PLACE - LINN			
24 TRENSHAW TRAIL		<b>Telephone</b> (573) 897-2100	Alzheimer's Unit NO
LINN	MO 65051-2874	Level of Care: RCF	<b>Bed Capacity</b> 24
Mailing Address 24 TRENSHAW TRA	AIL	County OSAGE	DMH Licensed No
LINN	MO 65051-2874	Region 6	Facility Number 31116
HADMONN CARDENG AGGROSS	I INING BY AMERICA DE		
HARMONY GARDENS - ASSISTED	LIVING BY AMERICARE	T-l-nh (CCO) 747 5411	Allahadan anta TTa M
503 BURKARTH ROAD	MO (4002 2145	<b>Telephone</b> (660) 747-5411	Alzheimer's Unit No
WARRENSBURG	MO 64093-3145	Level of Care: ALF** County JOHNSON	Bed Capacity 44  DMH Licensed No
Mailing Address 503 BURKARTH RE		•	
WARRENSBURG	MO 64093-3145	Region 3	Facility Number 18615
HAROLD AND LOUISE HEALTHC	ARE CENTER		
135 COMMUNICATION DR		<b>Telephone</b> (573) 221-1189	Alzheimer's Unit No
HANNIBAL	MO 63401-3670	Level of Care: RCF	<b>Bed Capacity</b> 98
Mailing Address 135 COMMUNICAT	ION DR	County MARION	DMH Licensed Yes
HANNIBAL	MO 63401-3670	Region 5	Facility Number 29639

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HARRIS HOUSE RESIDENTIAL CA	RE FACILITY, THE			
3859 EAST 59TH TERRACE		<b>Telephone</b> (816) 599-5230	Alzheimer's Unit	No
KANSAS CITY	MO 64130-4410	Level of Care: RCF	Bed Capacity	7
Mailing Address 3859 EAST 59TH TE	RRACE	County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64130-4410	Region 3	Facility Number 16	6225
HARRIS RESIDENTIAL CARE CEN	TERLIC			
401 SOUTH HENRY	TER EEC	<b>Telephone</b> (573) 756-5376	Alzheimer's Unit	No
FARMINGTON	MO 63640-1823	Level of Care: RCF*	Bed Capacity	37
Mailing Address PO BOX 671	WIO 03040-1023	County SAINT FRANCOIS	DMH Licensed	Yes
FARMINGTON	MO 63640-0675			
FARMINGTON	MO 03040-0073	Region 2	Facility Number 02	2256
HARTLAND RESIDENTIAL CARE	UENTEK	T-1	All-bedeen to the	NT
23435 LADDER DR	150 - 550 10 1550	<b>Telephone</b> (660) 886-7093	Alzheimer's Unit	No
MARSHALL	MO 65340-4662	Level of Care: RCF	Bed Capacity	12
Mailing Address 23435 LADDER DR		County SALINE	DMH Licensed	No
MARSHALL	MO 65340-4662	Region 5	Facility Number 15	5163
HARTMANN VILLAGE - ASSISTED	LIVING BY AMERICARE			
615 RANKIN MILL LN		<b>Telephone</b> (660) 882-9933	Alzheimer's Unit	No
BOONVILLE	MO 65233-2873	Level of Care: ALF**	Bed Capacity	42
Mailing Address 615 RANKIN MILL L	.N	County COOPER	DMH Licensed	No
BOONVILLE	MO 65233-2873	Region 6	Facility Number 20	6026
HARTON SENIOR LIVING				
1054 SOUTH HWY 47		<b>Telephone</b> (636) 377-4444	Alzheimer's Unit	No
WARRENTON	MO 63383-2625	Level of Care: RCF	Bed Capacity	36
Mailing Address 1054 SOUTH HWY 4	7	County WARREN	DMH Licensed	No
WARRENTON	MO 63383-2625	Region 6	Facility Number 30	0144
HARTVILLE CARE CENTER				
649 WEST ROLLA ST		<b>Telephone</b> (417) 741-6192	Alzheimer's Unit	No
HARTVILLE	MO 65667-8221	Level of Care: SNF	Bed Capacity	60
Mailing Address 649 WEST ROLLA S	Γ	County WRIGHT	DMH Licensed	No
HARTVILLE	MO 65667-8221	Region 1 Medicare/Medicaid	Facility Number 1	7946
HADWEGRED DEGIDENMAN GARR				
HARVESTER RESIDENTIAL CARE		m 1 1 (62.6) 020 2020		N
35 LILLIAN DR	NO 62204 F022	<b>Telephone</b> (636) 939-3833	Alzheimer's Unit	No
SAINT CHARLES	MO 63304-7032	Level of Care: RCF*	Bed Capacity	38
Mailing Address 35 LILLIAN DR		County SAINT CHARLES	DMH Licensed	Yes
SAINT CHARLES	MO 63304-7032	Region 5	Facility Number 03	3411
HAVEN THE				
HAVEN, THE		Tolophono (572) 999 1201	Alzhaiman's Unit	No
614 SOUTH BY-PASS	MO 62957 2240	<b>Telephone</b> (573) 888-1201	Alzheimer's Unit	No
KENNETT  Moding Address 612 SOUTH BY DAS	MO 63857-3240	Level of Care: RCF*	Bed Capacity	64 Vas
Mailing Address 612 SOUTH BY-PAS		County DUNKLIN	DMH Licensed	Yes
KENNETT	MO 63857-3240	Region 2	Facility Number 27	7620

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HEART OF THE OZARKS HEALTH	HCARE CENTER		
2004 CRESTVIEW ST		<b>Telephone</b> (417) 683-4129	Alzheimer's Unit No
AVA	MO 65608-8903	Level of Care: SNF	<b>Bed Capacity</b> 120
Mailing Address PO BOX 727		County DOUGLAS	<b>DMH Licensed</b> No
AVA	MO 65608-0727	Region 1 Medicare/Medicaid	Facility Number 01290
HEARTLAND 4 RESIDENTIAL CAI	RE FACILITY		
3919 MESSANIE STREET		<b>Telephone</b> (816) 676-1506	Alzheimer's Unit NO
SAINT JOSEPH	MO 64506-3458	Level of Care: RCF	<b>Bed Capacity</b> 20
Mailing Address 3919 MESSANIE ST	REET	County SAINT JOSEPH	DMH Licensed No
SAINT JOSEPH	MO 64506-3458	Region 4	Facility Number 15039
HEARTLAND CARE AND REHABII	LITATION CENTER		
2525 BOUTIN DR		<b>Telephone</b> (573) 334-5225	Alzheimer's Unit Yes
CAPE GIRARDEAU	MO 63701-8551	Level of Care: SNF	Bed Capacity 102
Mailing Address 2525 BOUTIN DR		County CAPE GIRARDEAU	DMH Licensed No
CAPE GIRARDEAU	MO 63701-8551	Region 2 Medicare/Medicaid	Facility Number 01023
HEARTLAND II RESIDENTIAL CA	RE FACILITY, INC		
117 SOUTH 15TH ST		<b>Telephone</b> (816) 676-1506	Alzheimer's Unit No
SAINT JOSEPH	MO 64501-2904	Level of Care: RCF*	Bed Capacity 52
Mailing Address 117 SOUTH 15TH ST		County BUCHANAN	DMH Licensed Yes
SAINT JOSEPH	MO 64501-2904	Region 4	Facility Number 18620
HEARTLAND III RCF			
1606 SOUTH 38TH ST		<b>Telephone</b> (816) 689-1084	Alzheimer's Unit No
SAINT JOSEPH	MO 64507-2216	Level of Care: RCF	Bed Capacity 18
Mailing Address PO BOX 8923		<b>County</b> BUCHANAN	<b>DMH Licensed</b> Yes
SAINT JOSEPH	MO 64508-8923	Region 4	Facility Number 00920
HEISINGER BLUFFS HEALTHCAR	RE WESTERN CAMPUS		
1306 WEST MAIN ST		<b>Telephone</b> (573) 635-0166	Alzheimer's Unit No
JEFFERSON CITY	MO 65109-1356	Level of Care: SNF	<b>Bed Capacity</b> 69
Mailing Address 1306 WEST MAIN S	Т	County COLE	DMH Licensed No
JEFFERSON CITY	MO 65109-1356	Region 6 Medicare/Medicaid	Facility Number 07572
HEIGINGED DI HEEG DEHAD AND	HEAT THEADE CENTED		
HEISINGER BLUFFS REHAB AND	HEALTHCARE CENTER	Tolophono (572) 626 6200	Algheimen's Huit
1002 WEST MAIN ST JEFFERSON CITY	MO 65100 6001	<b>Telephone</b> (573) 636-6288	Alzheimer's Unit No
	MO 65109-6901	Level of Care: SNF	Bed Capacity 60
Mailing Address 1002 WEST MAIN S'		County COLE	DMH Licensed No
JEFFERSON CITY	MO 65109-6901	Region 6 Medicare/Medicaid	Facility Number 03479
HEISINGER BLUFFS SENIOR LIVI	NG		
1002 WEST MAIN ST		<b>Telephone</b> (573) 636-6288	Alzheimer's Unit Yes
JEFFERSON CITY	MO 65109-6901	Level of Care: ALF**	Bed Capacity 111
Mailing Address 1002 WEST MAIN ST		County COLE	<b>DMH Licensed</b> No
JEFFERSON CITY	MO 65109-6901	Region 6	Facility Number 03479

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HENLEY PLACE OF NEOSHO, A SE	NIOR RESIDENCE BY AMERICARE			
1105 VILLAGE RD		<b>Telephone</b> (417) 451-1000	Alzheimer's Unit	No
NEOSHO	MO 64850-9076	Level of Care: RCF	Bed Capacity	50
Mailing Address 1105 VILLAGE RD		County NEWTON	DMH Licensed	No
NEOSHO	MO 64850-9076	Region 1	Facility Number	20193
NEOSITO	1120 01030 7070	Region 1	Tuellieg Tulliper	20173
HERITAGE CARE CENTER				
4401 NORTH HANLEY RD		<b>Telephone</b> (314) 521-7471	Alzheimer's Unit	No
SAINT LOUIS	MO 63134-2710	Level of Care: SNF	Bed Capacity	120
Mailing Address 4401 NORTH HANLE	EY RD	County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63134-2710	• _	Facility Number	00411
SAINT LOOIS	MO 03134-2710	Region 7 Medicare/Medicaid	Pacinty Number	00411
HERITAGE HALL NURSING CENT	ER			
750 EAST HIGHWAY 22		<b>Telephone</b> (573) 682-5551	Alzheimer's Unit	No
CENTRALIA	MO 65240-1146	Level of Care: SNF	Bed Capacity	60
Mailing Address 750 EAST HIGHWAY	22	County BOONE	DMH Licensed	No
CENTRALIA	MO 65240-1146	Region 6 Medicare/Medicaid	Facility Number	03069
CENTRALIA	110 03240 1140	Region o Medicare/Medicard	Tacinty Number	03009
HERITAGE HILLS ASSISTED LIVIN	NG FACILITY			
9651 STATE HIGHWAY 72		<b>Telephone</b> (573) 866-2003	Alzheimer's Unit	No
PATTON	MO 63662-9760	Level of Care: ALF	Bed Capacity	24
Mailing Address PO BOX B		County BOLLINGER	DMH Licensed	Yes
PATTON	MO 63662-0010	Region 2	Facility Number	18783
		Region 2	Tuemey Number	10703
HERITAGE NURSING CENTER - SE	CILLED NURSING BY AMERICARE			
1802 SAINT FRANCIS ST		<b>Telephone</b> (573) 888-1044	Alzheimer's Unit	No
KENNETT	MO 63857-1568	Level of Care: SNF	Bed Capacity	72
Mailing Address PO BOX 827		County DUNKLIN	DMH Licensed	No
KENNETT	MO 63857-0827	Region 2 Medicare/Medicaid	Facility Number	17522
				17533
HERMITAGE NURSING & REHAR				1/555
HERMITAGE NURSING & REHAB		Tolophone (417) 745 2111	Alghoiman's Linit	
18599 FIRST STREET	MO (57/29 0120	Telephone (417) 745-2111	Alzheimer's Unit	Yes
18599 FIRST STREET HERMITAGE	MO 65668-9129	Level of Care: SNF	Bed Capacity	Yes 120
18599 FIRST STREET HERMITAGE Mailing Address PO BOX 325		Level of Care: SNF County HICKORY	Bed Capacity DMH Licensed	Yes 120 No
18599 FIRST STREET HERMITAGE	MO 65668-9129 MO 65668-0325	Level of Care: SNF	Bed Capacity	Yes 120
18599 FIRST STREET HERMITAGE Mailing Address PO BOX 325		Level of Care: SNF County HICKORY	Bed Capacity DMH Licensed	Yes 120 No
18599 FIRST STREET HERMITAGE Mailing Address PO BOX 325 HERMITAGE		Level of Care: SNF County HICKORY Region 1 Medicare/Medicaid	Bed Capacity DMH Licensed	Yes 120 No
18599 FIRST STREET HERMITAGE Mailing Address PO BOX 325 HERMITAGE HICKORY MANOR 209 HICKORY ST	MO 65668-0325	Level of Care: SNF County HICKORY Region 1 Medicare/Medicaid  Telephone (573) 674-2111	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	Yes 120 No 10240
18599 FIRST STREET HERMITAGE Mailing Address PO BOX 325 HERMITAGE HICKORY MANOR 209 HICKORY ST LICKING		Level of Care: SNF County HICKORY Region 1 Medicare/Medicaid  Telephone (573) 674-2111 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	Yes 120 No 10240 No
18599 FIRST STREET HERMITAGE Mailing Address PO BOX 325 HERMITAGE HICKORY MANOR 209 HICKORY ST LICKING Mailing Address 209 HICKORY ST	MO 65668-0325 MO 65542-9847	Level of Care: SNF County HICKORY Region 1 Medicare/Medicaid  Telephone (573) 674-2111 Level of Care: SNF County TEXAS	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	Yes 120 No 10240 No 60 No
18599 FIRST STREET HERMITAGE Mailing Address PO BOX 325 HERMITAGE HICKORY MANOR 209 HICKORY ST LICKING	MO 65668-0325	Level of Care: SNF County HICKORY Region 1 Medicare/Medicaid  Telephone (573) 674-2111 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	Yes 120 No 10240 No
18599 FIRST STREET HERMITAGE Mailing Address PO BOX 325 HERMITAGE HICKORY MANOR 209 HICKORY ST LICKING Mailing Address 209 HICKORY ST	MO 65668-0325  MO 65542-9847  MO 65542-9847	Level of Care: SNF County HICKORY Region 1 Medicare/Medicaid  Telephone (573) 674-2111 Level of Care: SNF County TEXAS	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	Yes 120 No 10240 No 60 No
18599 FIRST STREET HERMITAGE Mailing Address PO BOX 325 HERMITAGE HICKORY MANOR 209 HICKORY ST LICKING Mailing Address 209 HICKORY ST LICKING	MO 65668-0325  MO 65542-9847  MO 65542-9847	Level of Care: SNF County HICKORY Region 1 Medicare/Medicaid  Telephone (573) 674-2111 Level of Care: SNF County TEXAS	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	Yes 120 No 10240 No 60 No
18599 FIRST STREET HERMITAGE Mailing Address PO BOX 325 HERMITAGE  HICKORY MANOR 209 HICKORY ST LICKING Mailing Address 209 HICKORY ST LICKING HIDDEN ACRES ASSISTED LIVING	MO 65668-0325  MO 65542-9847  MO 65542-9847	Level of Care: SNF County HICKORY Region 1 Medicare/Medicaid  Telephone (573) 674-2111 Level of Care: SNF County TEXAS Region 2 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	Yes 120 No 10240 No 60 No 07929
18599 FIRST STREET HERMITAGE Mailing Address PO BOX 325 HERMITAGE  HICKORY MANOR 209 HICKORY ST LICKING Mailing Address 209 HICKORY ST LICKING  HIDDEN ACRES ASSISTED LIVING 19235 STATE ROUTE EE SAINTE GENEVIEVE	MO 65668-0325  MO 65542-9847  MO 65542-9847  MO 63670-8213	Level of Care: SNF County HICKORY Region 1 Medicare/Medicaid  Telephone (573) 674-2111 Level of Care: SNF County TEXAS Region 2 Medicare/Medicaid  Telephone (573) 756-8141 Level of Care: ALF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	Yes 120 No 10240 No 60 No 07929
18599 FIRST STREET HERMITAGE Mailing Address PO BOX 325 HERMITAGE  HICKORY MANOR 209 HICKORY ST LICKING Mailing Address 209 HICKORY ST LICKING HIDDEN ACRES ASSISTED LIVING 19235 STATE ROUTE EE	MO 65668-0325  MO 65542-9847  MO 65542-9847  MO 63670-8213	Level of Care: SNF County HICKORY Region 1 Medicare/Medicaid  Telephone (573) 674-2111 Level of Care: SNF County TEXAS Region 2 Medicare/Medicaid  Telephone (573) 756-8141	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	Yes 120 No 10240 No 60 No 07929

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HIDDEN ACRES ASSISTED LIVING II LLC				
19235 STATE ROUTE EE	Telephone	(573) 756-8141	Alzheimer's Unit	No
SAINTE GENEVIEVE MO 6367	0-8213 Level of Care:	ALF	Bed Capacity	18
Mailing Address 19235 STATE ROUTE EE	<b>County</b> SA	INTE GENEVIEVE	DMH Licensed	Yes
SAINTE GENEVIEVE MO 6367	0-8213 <b>Region</b> 2		Facility Number 1	11134
HIGHLAND CREST - ASSISTED LIVING BY A	MERICARE			
2204 S HALLIBURTON ST	Telephone	(660) 627-8004	Alzheimer's Unit	No
KIRKSVILLE MO 6350	-	` '	Bed Capacity	42
Mailing Address 2204 S HALLIBURTON ST			DMH Licensed	No
KIRKSVILLE MO 6350	- · · · · ·			16785
KIRKIS VILLE MO 0330	Region 5		racinty Number	10763
HIGHLAND REHABILITATION & HEALTH CA				
904 EAST 68TH ST	Telephone	( /	Alzheimer's Unit	NO
KANSAS CITY MO 6413			Bed Capacity	162
Mailing Address 904 EAST 68TH ST	•		DMH Licensed	No
KANSAS CITY MO 6413	1-1305 <b>Region</b> 3	Medicare/Medicaid	Facility Number 0	)6782
HILL CREST MANOR				
801 SOUTH COLBY	Telephone	(816) 583-2119	Alzheimer's Unit	No
HAMILTON MO 6464	4-8287 Level of Care:	RCF	Bed Capacity	24
Mailing Address 801 SOUTH COLBY	County CA	ALDWELL	DMH Licensed	No
HAMILTON MO 6464	4-8287 <b>Region</b> 4		Facility Number 0	)3315
HILL CREST MANOR				
801 SOUTH COLBY	Telephone	(816) 583-2119	Alzheimer's Unit	No
HAMILTON MO 6464	•	` ′	Bed Capacity	90
Mailing Address 801 SOUTH COLBY			DMH Licensed	No
HAMILTON MO 6464	·			)3315
manufort mo order	Region 1	Wedicare/Wedicard	Tuesticy Tuniber	)3313
HILLCREST CARE CENTER, INC	(F) 1	(626) 506 2022	A1 1	N.T.
1108 CLARKE ST	Telephone	` /	Alzheimer's Unit	No
DE SOTO MO 63020			Bed Capacity	120
Mailing Address 1108 CLARKE ST	·		DMH Licensed	No
DE SOTO MO 63020	0-2706 <b>Region</b> 2	Medicare/Medicaid	Facility Number 2	20084
HILLSIDE LIVING CENTER				
10160 RESTORATION CIRCLE ROAD	Telephone	(573) 562-0303	Alzheimer's Unit	No
MINERAL POINT MO 6366	0-8538 Level of Care:	ALF**	Bed Capacity	60
Mailing Address PO BOX 534	County W.	ASHINGTON	DMH Licensed	Yes
PARK HILLS MO 6360	1-0534 <b>Region</b> 2		Facility Number 0	9270
HILLSIDE REHAB AND HEALTHCARE CENT	ER			
1265 MCLARAN AVE	Telephone	(314) 388-4121	Alzheimer's Unit	Yes
SAINT LOUIS MO 6314	<u>-</u>		Bed Capacity	208
Mailing Address 1265 MCLARAN AVE			DMH Licensed	No
SAINT LOUIS MO 6314				)4687
			-	

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HILLTOP AT BLUE RIVER, THE	
10425 CHESTNUT DR	<b>Telephone</b> (816) 763-4444 <b>Alzheimer's Unit</b> Yes
KANSAS CITY MO 64137-3	
Mailing Address 10425 CHESTNUT DR	County JACKSON DMH Licensed No
KANSAS CITY MO 64137-3	201 Region 3 Medicare/Medicaid Facility Number 19114
HILLTOP HAVEN RESIDENTIAL CARE FACILITY	TY
18941 CR 305A	<b>Telephone</b> (573) 226-5426 <b>Alzheimer's Unit</b> No
EMINENCE MO 65466-9	702 Level of Care: RCF Bed Capacity 20
Mailing Address 18941 CR 305A	County SHANNON DMH Licensed Yes
EMINENCE MO 65466-9	<b>Region</b> 2 <b>Facility Number</b> 03615
HOLDEN MANOR HEALTH & REHABILITATIO	
2005 SOUTH LEXINGTON	Telephone (816) 732-4138 Alzheimer's Unit No
HOLDEN MO 64040-1	• •
Mailing Address 2005 SOUTH LEXINGTON	County JOHNSON DMH Licensed No
HOLDEN MO 64040-1	Region 3 Medicare/Medicaid Facility Number 08334
HOLIDAY DEGIDENTIAL CARE	
HOLIDAY RESIDENTIAL CARE	(570) 547 7000
1019 OLD ST MARY'S RD	Telephone (573) 547-7398 Alzheimer's Unit No
PERRYVILLE MO 63775-1	
Mailing Address 1019 OLD ST MARY'S RD	County PERRY DMH Licensed No
PERRYVILLE MO 63775-1	298 Region 2 Facility Number 19872
HOLLY HILLS RETIREMENT HOME	
6421 MINNESOTA	<b>Telephone</b> (314) 351-0767 <b>Alzheimer's Unit</b> No
SAINT LOUIS MO 63111-2	
	• •
Mailing Address 6421 MINNESOTA	County SAINT LOUIS CITY DMH Licensed Yes
SAINT LOUIS MO 63111-2	·
SAINT LOUIS MO 63111-2	808 Region 7 Facility Number 03678
_	808 Region 7 Facility Number 03678
SAINT LOUIS MO 63111-2  HOMESTEAD AT HICKORY VIEW RETIREMEN	Region 7 Facility Number 03678  T COMMUNITY, THE Telephone (636) 239-1941 Alzheimer's Unit No
SAINT LOUIS MO 63111-2  HOMESTEAD AT HICKORY VIEW RETIREMEN 1481 MARBACH DRIVE WASHINGTON MO 63090-4	Region 7 Facility Number 03678  T COMMUNITY, THE  Telephone (636) 239-1941 Alzheimer's Unit No Level of Care: ALF Bed Capacity 36
SAINT LOUIS MO 63111-2  HOMESTEAD AT HICKORY VIEW RETIREMEN 1481 MARBACH DRIVE	Region 7 Facility Number 03678  T COMMUNITY, THE  Telephone (636) 239-1941 Alzheimer's Unit No Level of Care: ALF Bed Capacity 36 County FRANKLIN DMH Licensed No
HOMESTEAD AT HICKORY VIEW RETIREMEN 1481 MARBACH DRIVE WASHINGTON MO 63090-4 Mailing Address 1481 MARBACH DRIVE	Region 7 Facility Number 03678  T COMMUNITY, THE  Telephone (636) 239-1941 Alzheimer's Unit No Level of Care: ALF Bed Capacity 36 County FRANKLIN DMH Licensed No
HOMESTEAD AT HICKORY VIEW RETIREMEN 1481 MARBACH DRIVE WASHINGTON MO 63090-4 Mailing Address 1481 MARBACH DRIVE	Region 7 Facility Number 03678  T COMMUNITY, THE  Telephone (636) 239-1941 Alzheimer's Unit No Level of Care: ALF Bed Capacity 36 County FRANKLIN DMH Licensed No
HOMESTEAD AT HICKORY VIEW RETIREMENT 1481 MARBACH DRIVE WASHINGTON MO 63090-4 Mailing Address 1481 MARBACH DRIVE WASHINGTON MO 63090-4	Region 7 Facility Number 03678  T COMMUNITY, THE  Telephone (636) 239-1941 Alzheimer's Unit No Level of Care: ALF Bed Capacity 36 County FRANKLIN DMH Licensed No
HOMESTEAD AT HICKORY VIEW RETIREMENT 1481 MARBACH DRIVE WASHINGTON MO 63090-4 Mailing Address 1481 MARBACH DRIVE WASHINGTON MO 63090-4 HOPE CARE CENTER	Region 7 Facility Number 03678  T COMMUNITY, THE  Telephone (636) 239-1941 Alzheimer's Unit No 636 Level of Care: ALF Bed Capacity 36 County FRANKLIN DMH Licensed No 636 Region 6 Facility Number 32345  Telephone (816) 523-3988 Alzheimer's Unit No
HOMESTEAD AT HICKORY VIEW RETIREMENT 1481 MARBACH DRIVE WASHINGTON MO 63090-4 Mailing Address 1481 MARBACH DRIVE WASHINGTON MO 63090-4  HOPE CARE CENTER 115 EAST 83RD ST KANSAS CITY MO 64114-2	Region 7 Facility Number 03678  T COMMUNITY, THE  Telephone (636) 239-1941 Alzheimer's Unit No 636 Level of Care: ALF Bed Capacity 36 County FRANKLIN DMH Licensed No 636 Region 6 Facility Number 32345  Telephone (816) 523-3988 Alzheimer's Unit No
HOMESTEAD AT HICKORY VIEW RETIREMENT 1481 MARBACH DRIVE WASHINGTON MO 63090-4 Mailing Address 1481 MARBACH DRIVE WASHINGTON MO 63090-4 HOPE CARE CENTER 115 EAST 83RD ST	Region 7 Facility Number 03678  T COMMUNITY, THE  Telephone (636) 239-1941 Alzheimer's Unit No 636 Level of Care: ALF Bed Capacity 36 County FRANKLIN DMH Licensed No 636 Region 6 Facility Number 32345  Telephone (816) 523-3988 Alzheimer's Unit No Level of Care: SNF Bed Capacity 16 County JACKSON DMH Licensed No
HOMESTEAD AT HICKORY VIEW RETIREMENT  1481 MARBACH DRIVE  WASHINGTON MO 63090-4  Mailing Address 1481 MARBACH DRIVE  WASHINGTON MO 63090-4  HOPE CARE CENTER  115 EAST 83RD ST  KANSAS CITY MO 64114-2  Mailing Address 115 EAST 83RD ST	Region 7 Facility Number 03678  T COMMUNITY, THE  Telephone (636) 239-1941 Alzheimer's Unit No 636 Level of Care: ALF Bed Capacity 36 County FRANKLIN DMH Licensed No 636 Region 6 Facility Number 32345  Telephone (816) 523-3988 Alzheimer's Unit No Level of Care: SNF Bed Capacity 16 County JACKSON DMH Licensed No
HOMESTEAD AT HICKORY VIEW RETIREMENT 1481 MARBACH DRIVE WASHINGTON MO 63090-4 Mailing Address 1481 MARBACH DRIVE WASHINGTON MO 63090-4 HOPE CARE CENTER 115 EAST 83RD ST KANSAS CITY MO 64114-2 Mailing Address 115 EAST 83RD ST KANSAS CITY MO 64114-2 HOPEDALE COTTAGE ASSISTED LIVING THE	Region 7 Facility Number 03678  T COMMUNITY, THE  Telephone (636) 239-1941 Alzheimer's Unit No Level of Care: ALF Bed Capacity 36 County FRANKLIN DMH Licensed No Region 6 Facility Number 32345  Telephone (816) 523-3988 Alzheimer's Unit No Level of Care: SNF Bed Capacity 16 County JACKSON DMH Licensed No Region 3 Medicaid Facility Number 21370
HOMESTEAD AT HICKORY VIEW RETIREMENT 1481 MARBACH DRIVE WASHINGTON MO 63090-4 Mailing Address 1481 MARBACH DRIVE WASHINGTON MO 63090-4 HOPE CARE CENTER 115 EAST 83RD ST KANSAS CITY MO 64114-2 Mailing Address 115 EAST 83RD ST KANSAS CITY MO 64114-2 HOPEDALE COTTAGE ASSISTED LIVING THE	Region 7 Facility Number 03678  T COMMUNITY, THE  Telephone (636) 239-1941 Alzheimer's Unit No 636 Level of Care: ALF Bed Capacity 36 County FRANKLIN DMH Licensed No 636 Region 6 Facility Number 32345  Telephone (816) 523-3988 Alzheimer's Unit No Level of Care: SNF Bed Capacity 16 County JACKSON DMH Licensed No 537 Region 3 Medicaid Facility Number 21370  Telephone (417) 581-1308 Alzheimer's Unit Yes
HOMESTEAD AT HICKORY VIEW RETIREMENT 1481 MARBACH DRIVE WASHINGTON MO 63090-4 Mailing Address 1481 MARBACH DRIVE WASHINGTON MO 63090-4  HOPE CARE CENTER 115 EAST 83RD ST KANSAS CITY MO 64114-2 Mailing Address 115 EAST 83RD ST KANSAS CITY MO 64114-2  HOPEDALE COTTAGE ASSISTED LIVING THE 1314 W SCHOOL STREET OZARK MO 65721-6	T COMMUNITY, THE  Telephone (636) 239-1941 Alzheimer's Unit No 636 Level of Care: ALF Bed Capacity 36 County FRANKLIN DMH Licensed No 636 Region 6 Facility Number 32345  Telephone (816) 523-3988 Alzheimer's Unit No Level of Care: SNF Bed Capacity 16 County JACKSON DMH Licensed No 537 Region 3 Medicaid Facility Number 21370  Telephone (417) 581-1308 Alzheimer's Unit Yes 618 Level of Care: ALF** Bed Capacity 14
HOMESTEAD AT HICKORY VIEW RETIREMENT 1481 MARBACH DRIVE WASHINGTON MO 63090-4 Mailing Address 1481 MARBACH DRIVE WASHINGTON MO 63090-4 HOPE CARE CENTER 115 EAST 83RD ST KANSAS CITY MO 64114-2 Mailing Address 115 EAST 83RD ST KANSAS CITY MO 64114-2 HOPEDALE COTTAGE ASSISTED LIVING THE	Region 7 Facility Number 03678  T COMMUNITY, THE  Telephone (636) 239-1941 Alzheimer's Unit No Level of Care: ALF Bed Capacity 36 County FRANKLIN DMH Licensed No Region 6 Facility Number 32345  Telephone (816) 523-3988 Alzheimer's Unit No Level of Care: SNF Bed Capacity 16 County JACKSON DMH Licensed No Region 3 Medicaid Facility Number 21370  Telephone (417) 581-1308 Alzheimer's Unit Yes Level of Care: ALF** Bed Capacity 14 County CHRISTIAN DMH Licensed No

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HOUSE OF CARE CENTER		T. 1. (016) 021 6052		
3744 BENTON BLVD	MO (4120 2515	<b>Telephone</b> (816) 921-6852	Alzheimer's Unit	No
KANSAS CITY	MO 64128-2515	Level of Care: RCF County JACKSON	Bed Capacity	8 V
Mailing Address 3744 BENTON BLV KANSAS CITY	MO 64128-7912	•	DMH Licensed	Yes 17001
KANSAS CITY	MO 64128-7912	Region 3	Facility Number	1/001
HOUSTON HOUSE				
1000 NORTH INDUSTRIAL DR		<b>Telephone</b> (417) 967-2527	Alzheimer's Unit	No
HOUSTON	MO 65483-9400	Level of Care: SNF	<b>Bed Capacity</b>	96
Mailing Address PO BOX 199		<b>County</b> TEXAS	DMH Licensed	No
HOUSTON	MO 65483-0199	Region 2 Medicare/Medicaid	Facility Number	10626
HUDSON HOUSE				
1700-B SOUTH HUDSON AVE		<b>Telephone</b> (417) 678-2169	Alzheimer's Unit	No
AURORA	MO 65605-2717	Level of Care: RCF*	Bed Capacity	41
Mailing Address 1700-B S HUDSON	AVE	<b>County</b> LAWRENCE	DMH Licensed	No
AURORA	MO 65605-2717	Region 1	Facility Number	10444
HUNTER ACRES CARING CENTE	7 <b>D</b>			
628 NORTH WEST ST	Z.K.	<b>Telephone</b> (573) 471-7130	Alzheimer's Unit	Yes
SIKESTON	MO 63801-4738	Level of Care: SNF	Bed Capacity	120
Mailing Address 628 NORTH WEST		County SCOTT	DMH Licensed	No
SIKESTON	MO 63801-4738	Region 2 Medicare/Medicaid	Facility Number	07345
	110 00001 1100	Region 2 Medicare/Medicard	rumey rumber	07545
IGNITE MEDICAL RESORT BLUI	E SPRINGS			
20511 E TRINITY PLACE		<b>Telephone</b> (816) 622-2900	Alzheimer's Unit	NO
BLUE SPRINGS	MO 64015-9501	Level of Care: SNF	Bed Capacity	90
Mailing Address 20511 E TRINITY F	PLACE	County JACKSON	DMH Licensed	No
BLUE SPRINGS	MO 64015-9501	Region 3 Medicare/Medicaid	Facility Number	32246
IGNITE MEDICAL RESORT CAR	ONDELET LLC			
621 CARONDELET DR		<b>Telephone</b> (816) 941-1300	Alzheimer's Unit	No
KANSAS CITY	MO 64114-4670	Level of Care: SNF	<b>Bed Capacity</b>	162
Mailing Address 621 CARONDELET	ΓDR	County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64114-4670	Region 3 Medicare/Medicaid	<b>Facility Number</b>	12185
IGNITE MEDICAL RESORT KAN	SAS CITY LLC			
2100 NW BARRY ROAD		<b>Telephone</b> (816) 521-6610	Alzheimer's Unit	No
KANSAS CITY	MO 64154-1000	Level of Care: SNF	Bed Capacity	90
Mailing Address 2100 NW BARRY I	ROAD	<b>County</b> PLATTE	DMH Licensed	No
KANSAS CITY	MO 64154-1000	Region 4 Medicare/Medicaid	Facility Number	31464
IGNITE MEDICAL RESORT ST M	IARYS LLC			
111 MOCK AVE		<b>Telephone</b> (816) 220-4200	Alzheimer's Unit	Yes
BLUE SPRINGS	MO 64014-2504	Level of Care: SNF	<b>Bed Capacity</b>	130
Mailing Address 111 MOCK AVE		<b>County</b> JACKSON	DMH Licensed	No
DI LIE ADDRIGA	3.50 51011.3501		T	

Region 3

Medicare/Medicaid

**Facility Number** 

13219

MO 64014-2504

BLUE SPRINGS

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INDEPENDENCE CARE CENTER OF PERRY COUNTY		
800 SOUTH KINGSHIGHWAY	<b>Telephone</b> (573) 547-6546	Alzheimer's Unit Yes
PERRYVILLE MO 63775-2106	Level of Care: SNF	<b>Bed Capacity</b> 133
Mailing Address 800 SOUTH KINGSHWY	<b>County</b> PERRY	DMH Licensed No
PERRYVILLE MO 63775-2106	Region 2 Medicare/Medicaid	Facility Number 06393
INDEDENDENCE COURT		
INDEPENDENCE COURT 121 INDEPENDENCE DR	Telephone (573) 547 1400	Alzheimer's Unit No
PERRYVILLE MO 63775-1496	<b>Telephone</b> (573) 547-1499 <b>Level of Care:</b> RCF*	Alzheimer's Unit No Bed Capacity 75
Mailing Address 121 INDEPENDENCE DR		DMH Licensed No
PERRYVILLE MO 63775-1496	County PERRY  Region 2	
FERR I VILLE NIO 03//3-1490	Region 2	Facility Number 06393
INDEPENDENCE MANOR CARE CENTER		
1600 SOUTH KINGS HIGHWAY	<b>Telephone</b> (816) 833-4777	Alzheimer's Unit Yes
INDEPENDENCE MO 64055-1853	Level of Care: SNF	<b>Bed Capacity</b> 99
Mailing Address 1600 SOUTH KINGS HIGHWAY	<b>County</b> JACKSON	<b>DMH Licensed</b> No
INDEPENDENCE MO 64055-1853	Region 3 Medicare/Medicaid	Facility Number 03807
J & J RESIDENTIAL CARE FACILITY II		
104 WESBECHER	<b>Telephone</b> (573) 238-1008	Alzheimer's Unit No
MARBLE HILL MO 63764-0378	Level of Care: RCF*	Bed Capacity 12
Mailing Address PO BOX 378	County BOLLINGER	DMH Licensed Yes
MARBLE HILL MO 63764-0378	Region 2	Facility Number 07171
		3,1,1
JACKSON CREEK MEMORY CARE		
19400 EAST 40TH ST COURT SOUTH	<b>Telephone</b> (816) 478-5689	Alzheimer's Unit Yes
INDEPENDENCE MO 64057-1548	Level of Care: ICF	<b>Bed Capacity</b> 70
Mailing Address 19400 EAST 40TH ST COURT SOUTH	County JACKSON	<b>DMH Licensed</b> No
INDEPENDENCE MO 64057-1548	Region 3	Facility Number 25894
JACKSON CREEK POST ACUTE		
3980 SOUTH JACKSON DR	<b>Telephone</b> (816) 795-1433	Alzheimer's Unit No
INDEPENDENCE MO 64057-2205	Level of Care: ALF**	<b>Bed Capacity</b> 62
Mailing Address 3980 S JACKSON DR	<b>County</b> JACKSON	DMH Licensed No
INDEPENDENCE MO 64057-2205	Region 3	Facility Number 25709
	• •	·
JACKSON CREEK POST ACUTE		
3980 SOUTH JACKSON DR	<b>Telephone</b> (816) 795-1433	Alzheimer's Unit No
INDEPENDENCE MO 64057-2205	Level of Care: SNF	Bed Capacity 120
Mailing Address 3980 S JACKSON DR	County JACKSON	<b>DMH Licensed</b> No
INDEPENDENCE MO 64057-2205	Region 3 Medicare/Medicaid	Facility Number 25709
JACKSON MANOR		
710 BROADRIDGE DR	<b>Telephone</b> (573) 243-3101	Alzheimer's Unit No
JACKSON MO 63755-3042	Level of Care: SNF	<b>Bed Capacity</b> 90
Mailing Address 710 BROADRIDGE DR	<b>County</b> CAPE GIRARDEAU	DMH Licensed No
JACKSON MO 63755-3042	Region 2 Medicare/Medicaid	Facility Number 03438

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JACOBS CARE CENTER, LLC					
932 WEST STATE		Telephone	(417) 865-6140	Alzheimer's Unit	No
SPRINGFIELD MO 65	5806-2846	Level of Care:	RCF	Bed Capacity	12
Mailing Address 932 WEST STATE		County GRI	EENE	DMH Licensed	Yes
SPRINGFIELD MO 65	5806-2846	Region 1		Facility Number	06229
JAMES RIVER NURSING AND REHABILITA	ATION				
3550 EAST BATTLEFIELD		Telephone	(417) 889-9500	Alzheimer's Unit	No
	5809-3400	Level of Care:	SNF	Bed Capacity	120
Mailing Address 3550 EAST BATTLEFIELD		•	EENE	DMH Licensed	No
SPRINGFIELD MO 65	5809-3400	Region 1 M	Medicare/Medicaid	Facility Number	17645
TANE HOWELL GOVERN A DARRINGS					
JANE HOWELL STUPP APARTMENTS 2443 PROUHET AVE		Telephone	(314) 890-7100	Alzheimer's Unit	No
	3114-1946	Level of Care:	RCF*	Bed Capacity	30
Mailing Address 2443 PROUHET AVE	5114-1940		NT LOUIS COUNTY	DMH Licensed	Yes
_	3114-1946	·	NI LOUIS COUNTI	Facility Number	
OVERLAND MO 03	3114-1940	Region 7		Facility Number	18369
JEANNE JUGAN CENTER					
8745 JAMES A REED ROAD		Telephone	(816) 761-4744	Alzheimer's Unit	No
KANSAS CITY MO 64		Level of Care:	ICF	Bed Capacity	26
Mailing Address 8745 JAMES A REED RD		County JAC	CKSON	DMH Licensed	No
_	4138-4414	•	Medicaid	Facility Number	12724
		region :	, redicular	- 555-255, - 1,22-25-25	12/21
JEANNE JUGAN CENTER					
8745 JAMES A REED ROAD		Telephone	(816) 761-4744	Alzheimer's Unit	No
KANSAS CITY MO 64	4138-4414	Level of Care:	SNF	<b>Bed Capacity</b>	26
Mailing Address 8745 JAMES A REED RD		County JAC	CKSON	DMH Licensed	No
KANSAS CITY MO 64	4138-4414	Region 3 N	Medicaid	Facility Number	12724
HEEREDSON CHEV MANOD CADE CENTED					
JEFFERSON CITY MANOR CARE CENTER 1720 VIETH DR		Telephone	(573) 635-6193	Alzheimer's Unit	No
	5109-2522	Level of Care:	SNF	Bed Capacity	102
Mailing Address 1720 VIETH DR		County COl		DMH Licensed	No
			Medicare/Medicaid	Facility Number	03870
JEH EKSON CH 1	3107-2322	Region o P	viedicai e/iviedicaid	racinty Number	03870
JEFFERSON CITY NURSING AND REHABII	LITATION CENTER, LLC				
1221 SOUTHGATE LN		Telephone	(573) 635-3131	Alzheimer's Unit	Yes
JEFFERSON CITY MO 65	5109-2465	Level of Care:	SNF	<b>Bed Capacity</b>	120
Mailing Address PO BOX 104118		County COI	LE	DMH Licensed	No
JEFFERSON CITY MO 65	5110-4118	Region 6	Medicare/Medicaid	Facility Number	01865
TEEEEDOON CADDENG ACCIONED FINIS	C DV AMEDICADE				
JEFFERSON GARDENS - ASSISTED LIVING 509 WEST ROGERS ST		Telephone	(660) 885-9770	Alzheimer's Unit	No
		Level of Care:	ALF**	Bed Capacity	42
Mailing Address 509 WEST ROGERS ST	T133-4370		NRY	DMH Licensed	No
	4735-2548	•	117.1	Facility Number	20603
CENTION MO 04	T13J-4J+0	Region 1		racinty Number	20003

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JEFFERSON HEALTH CARE				
615 SW OLDHAM PARKWAY		<b>Telephone</b> (816) 524-3328	Alzheimer's Unit	No
LEE'S SUMMIT	MO 64081-2602	Level of Care: SNF	Bed Capacity	120
Mailing Address 615 SW OLDHAM PKV	WY	County JACKSON	DMH Licensed	No
LEE'S SUMMIT	MO 64081-2602	Region 3 Medicare/Medicaid	Facility Number	04415
IOE CLADE DECIDENTIAL CADE II	OME			
JOE CLARK RESIDENTIAL CARE H 1495 EAST ASHLAND ST	OME	Talanhana (417) 667 5000	Alahaiman'a Unit	No
	MO 64772-4016	Telephone (417) 667-5000 Level of Care: ALF**	Alzheimer's Unit	34
Mailing Address PO BOX 246	WIO 04/72-4010		Bed Capacity  DMH Licensed	No
9	MO 64772-0246			
NEVADA	WIO 04772-0240	Region 1	Facility Number	23419
JOHN KNOX VILLAGE CARE CENT	ER	Tolonhono (916) 247 2400	Alahaiman'a II:4	<b>V</b>
600 NW PRYOR ROAD	MO (4001 1104	<b>Telephone</b> (816) 347-2400	Alzheimer's Unit	Yes
	MO 64081-1104	Level of Care: SNF	Bed Capacity	408
Mailing Address 600 NW PRYOR RD	MO (4001 1104	County JACKSON	DMH Licensed	No
LEE'S SUMMIT	MO 64081-1104	Region 3 Medicare/Medicaid	Facility Number	14529
TOTINGON GOTTAMIN G. DE CENTE				
JOHNSON COUNTY CARE CENTER		m 1 1 (660) 747 0101		
122 EAST MARKET ST	NO. 64002 1010	<b>Telephone</b> (660) 747-8101	Alzheimer's Unit	No
	MO 64093-1818	Level of Care: ICF	Bed Capacity	87
Mailing Address 122 EAST MARKET S'		County JOHNSON	DMH Licensed	No
WARRENSBURG	MO 64093-1818	Region 3 Medicaid	Facility Number	05309
TOT EAR HOME				
JOLET HOME		T-l (916) 521 5209	A 1-1	NI-
3920 FOREST	MO (4110 1220	<b>Telephone</b> (816) 531-5308	Alzheimer's Unit	No
	MO 64110-1220	Level of Care: RCF	Bed Capacity	17 V
Mailing Address 3920 FOREST	MO 64110-1220	County JACKSON	DMH Licensed	Yes
KANSAS CITY	MO 04110-1220	Region 3	Facility Number	03982
IONES! WILDWOOD CADE CENTER				
JONES' WILDWOOD CARE CENTER 12806 HWY 151	•	<b>Telephone</b> (660) 291-8636	Alzheimer's Unit	No
	MO 65263-3114	Level of Care: RCF	Bed Capacity	32
Mailing Address PO BOX 69	110 03203 3114	County MONROE	DMH Licensed	Yes
-	MO 65263-0069	Region 5		08573
WI IS IS CITY	110 03203 0009	Region 5	Tuellity Tulliber	00373
JOPLIN GARDENS				
2810 SOUTH JACKSON AVE		<b>Telephone</b> (417) 572-0041	Alzheimer's Unit	No
	MO 64804-2524	Level of Care: SNF	Bed Capacity	92
Mailing Address 2810 SOUTH JACKSO		County JASPER	DMH Licensed	No
	MO 64804-2524	Region 1 Medicare/Medicaid		01373
JOI DIN	1120 UT0UT-232T	region i Medicare/Medicald	1 acmity 1 willion	013/3
JOPLIN HEALTH AND REHABILITA	TION CENTER			
2218 WEST 32ND ST		<b>Telephone</b> (417) 623-5264	Alzheimer's Unit	Yes
	MO 64804-3514	Level of Care: SNF	Bed Capacity	120
Mailing Address 2218 WEST 32ND ST		County NEWTON	DMH Licensed	No
	MO 64804-3514	Region 1 Medicare/Medicaid		12583
· - · · · · · · · · · · · · · · · · · ·		- 172 dicardifficated		- 20 00

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JOY ADULT CARE CENTER				
614 SOUTH MAIN		<b>Telephone</b> (660) 885-8328	Alzheimer's Unit	No
CLINTON	MO 64735-2620	Level of Care: RCF*	<b>Bed Capacity</b>	42
Mailing Address PO BOX 8		County HENRY	DMH Licensed	Yes
CLINTON	MO 64735-0008	Region 1	<b>Facility Number</b>	07268
JOY ASSISTED LIVING FOR SENIO	)DC			
2030 W MOUNT VERNON ST	)KS	<b>Telephone</b> (417) 864-8805	Alzheimer's Unit	No
SPRINGFIELD	MO 65802-4846	Level of Care: ALF	Bed Capacity	74
	WO 03002-4040	County GREENE	DMH Licensed	Yes
Mailing Address PO BOX 9655 SPRINGFIELD	MO 65801-9655			
SERMOFIELD	WIO 03801-9033	Region 1	Facility Number	19668
KABUL NURSING HOMES, INC 1000 MAIN ST		Tolophone (417) 0/2 2712	Alzheimer's Unit	NT.
	MO (5(00 0125	<b>Telephone</b> (417) 962-3713		No
CABOOL 1000 MAIN ST	MO 65689-9125	Level of Care: SNF	Bed Capacity	99 N
Mailing Address 1000 MAIN ST	NO. (5(00.0125	County TEXAS	DMH Licensed	No
CABOOL	MO 65689-9125	Region 2 Medicare/Medicaid	Facility Number	04085
KASEY PAIGE HEALTH CARE CEN	NTER			
3715 JAMIESON AVE		<b>Telephone</b> (314) 781-0222	Alzheimer's Unit	No
SAINT LOUIS	MO 63109-1109	Level of Care: RCF	Bed Capacity	111
Mailing Address 3715 JAMIESON AV		County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS	MO 63109-1109	Region 7	Facility Number	04650
KATY MANOR				
205 PROSPECT		<b>Telephone</b> (660) 834-3111	Alzheimer's Unit	No
PILOT GROVE	MO 65276-1111	Level of Care: SNF	Bed Capacity	60
Mailing Address PO BOX 8		County COOPER	DMH Licensed	No
PILOT GROVE	MO 65276-0008	Region 6 Medicare/Medicaid	Facility Number	14982
KIDWELL HOME				
1000 KIDWELL DR	160	<b>Telephone</b> (573) 378-5175	Alzheimer's Unit	No
VERSAILLES	MO 65084-1177	Level of Care: RCF*	Bed Capacity	44
Mailing Address 1000 KIDWELL DR		County MORGAN	DMH Licensed	No
VERSAILLES	MO 65084-1177	Region 6	Facility Number	21631
KINGDOM CARE SENIOR LIVING	LLC			
811 CENTER ST		<b>Telephone</b> (573) 642-6646	Alzheimer's Unit	No
FULTON	MO 65251-1922	Level of Care: SNF	Bed Capacity	36
Mailing Address 811 CENTER ST		<b>County</b> CALLAWAY	DMH Licensed	No
FULTON	MO 65251-1922	Region 6 Medicare/Medicaid	Facility Number	18735
KINGDOM CARE SENIOR LIVING	LLC	T 1 1 (570) 210 221	A11 * 1 *** **	3.7
811 CENTER ST	MO (5051 1022	<b>Telephone</b> (573) 642-6646	Alzheimer's Unit	No
FULTON	MO 65251-1922	Level of Care: ALF	Bed Capacity	41
Mailing Address 811 CENTER ST		County CALLAWAY	DMH Licensed	No

Region 6

**Facility Number** 

18735

MO 65251-1922

**FULTON** 

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KING'S DAUGHTERS HOME, THE		T. I. I. (572) 591 1577	AT TOTAL TOTAL	N
620 WEST BOULEVARD ST	NO 57257 2400	<b>Telephone</b> (573) 581-1577	Alzheimer's Unit	No
MEXICO	MO 65265-2199	Level of Care: ICF	Bed Capacity	39
Mailing Address 620 WEST BOULEV		County AUDRAIN	DMH Licensed	No
MEXICO	MO 65265-2199	Region 5	Facility Number	04146
KING'S DAUGHTERS HOME, THE				
620 WEST BOULEVARD ST		<b>Telephone</b> (573) 581-1577	Alzheimer's Unit	No
MEXICO	MO 65265-2199	Level of Care: RCF*	Bed Capacity	12
Mailing Address 620 WEST BOULEV		County AUDRAIN	DMH Licensed	No
MEXICO	MO 65265-2199	Region 5	Facility Number	04146
MLAICO	WO 03203-2177	Kegion 5	racinty Number	04140
KINGSLAND WALK SENIOR LIVIN	NG			
868 KINGSLAND AVENUE		<b>Telephone</b> (314) 955-6884	Alzheimer's Unit	Yes
UNIVERSITY CITY	MO 63130-3181	Level of Care: ALF**	Bed Capacity	70
Mailing Address 868 KINGSLAND AV	VENUE	County SAINT LOUIS COUNTY	DMH Licensed	No
UNIVERSITY CITY	MO 63130-3181	Region 7	Facility Number	32203
KINGSWOOD				
10000 WORNALL RD		<b>Telephone</b> (816) 942-0994	Alzheimer's Unit	Yes
KANSAS CITY	MO 64114-4359	Level of Care: ALF**	Bed Capacity	67
Mailing Address 10000 WORNALL RI		County JACKSON	DMH Licensed	Yes
KANSAS CITY	MO 64114-4359	Region 3	Facility Number	04152
KANSAS CITT	WO 04114-433)	Region 5	racinty Number	04132
KINGSWOOD				
10000 WORNALL RD		<b>Telephone</b> (816) 942-0994	Alzheimer's Unit	Yes
KANSAS CITY	MO 64114-4359	Level of Care: SNF	<b>Bed Capacity</b>	86
Mailing Address 10000 WORNALL R	D	County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64114-4359	Region 3 Medicare/Medicaid	Facility Number	04152
KIRKSVILLE MANOR CARE CENT	rer			
1705 EAST LAHARPE		<b>Telephone</b> (660) 665-3774	Alzheimer's Unit	No
KIRKSVILLE	MO 63501-3927	Level of Care: SNF	Bed Capacity	132
Mailing Address 1705 EAST LAHARF		County ADAIR	DMH Licensed	No
KIRKSVILLE	MO 63501-3927	Region 5 Medicare/Medicaid	Facility Number	04161
KNOX COUNTY NURSING HOME I	DISTRICT			
55774 STATE HIGHWAY 6		<b>Telephone</b> (660) 397-2282	Alzheimer's Unit	No
EDINA	MO 63537-4253	Level of Care: SNF	Bed Capacity	60
Mailing Address 55774 STATE HIGHY	WAY 6	County KNOX	DMH Licensed	No
EDINA	MO 63537-4253	Region 5 Medicare/Medicaid	Facility Number	04173
LA BELLE MANOR CARE CENTER	R			
1002 CENTRAL		<b>Telephone</b> (660) 213-3234	Alzheimer's Unit	Yes
LA BELLE	MO 63447-2092	Level of Care: SNF	Bed Capacity	94
Mailing Address 1002 CENTRAL		County LEWIS	DMH Licensed	No
LA BELLE	MO 63447-2092	Region 5 Medicare/Medicaid	Facility Number	04212
		-		

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LA BONNE MAISON-ASSISTED LIV	VING BY AMERICARE		
226 PLAZA DR		<b>Telephone</b> (573) 472-2546	Alzheimer's Unit No
SIKESTON	MO 63801-5105	Level of Care: ALF**	Bed Capacity 30
Mailing Address 226 PLAZA DR	110	County SCOTT	DMH Licensed No
SIKESTON	MO 63801-5105	Region 2	Facility Number 28804
LA PLATA NURSING HOME			
100 OLD STAGECOACH RD	1.0 (0.7.10 1.0.0)	<b>Telephone</b> (660) 332-4315	Alzheimer's Unit No
LA PLATA	MO 63549-1362	Level of Care: SNF	Bed Capacity 52
Mailing Address 100 OLD STAGECOA		County MACON	DMH Licensed No
LA PLATA	MO 63549-1362	Region 5 Medicare/Medicaid	Facility Number 04395
LACLEDE COMMONS			
727 S LACLEDE STATION RD		<b>Telephone</b> (314) 968-5570	Alzheimer's Unit Yes
SAINT LOUIS	MO 63119-4911	Level of Care: ALF**	Bed Capacity 242
Mailing Address 727 S LACLEDE STA		County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS	MO 63119-4911	Region 7	Facility Number 17713
SAINT LOUIS	WIO 03117-4711	Region /	racinty Number 17713
LACOBA HOMES, INC			
850 HIGHWAY 60		<b>Telephone</b> (417) 235-7895	Alzheimer's Unit No
MONETT	MO 65708-9376	Level of Care: SNF	<b>Bed Capacity</b> 79
Mailing Address PO BOX 885		County BARRY	DMH Licensed No
MONETT	MO 65708-0885	Region 1 Medicare/Medicaid	Facility Number 04315
			•
LAKE GEORGE ASSISTED LIVING			
5000 E RICHLAND RD		<b>Telephone</b> (573) 442-0577	Alzheimer's Unit No
COLUMBIA	MO 65201-9606	Level of Care: ALF**	Bed Capacity 10
Mailing Address 5000 EAST RICHLAN	ND RD	County BOONE	<b>DMH Licensed</b> No
COLUMBIA	MO 65201-9606	Region 6	Facility Number 28997
LAVE DADVE CENTOD LIVING			
LAKE PARKE SENIOR LIVING 145 4TH ST		<b>Telephone</b> (573) 745-0874	Alzheimer's Unit NO
CAMDENTON	MO 65020-7138	Level of Care: ALF**	Bed Capacity 22
Mailing Address 145 4TH ST	WIO 03020-7138	County CAMDEN	DMH Licensed No
CAMDENTON	MO 65020-7138	Region 6	Facility Number 30084
CAMBENTON	WO 03020-7136	Kegion 0	Facility Number 50084
LAKE PARKE SENIOR LIVING			
145 4TH ST		<b>Telephone</b> (573) 745-0874	Alzheimer's Unit No
CAMDENTON	MO 65020-7138	Level of Care: ALF	Bed Capacity 74
Mailing Address 145 4TH ST		County CAMDEN	DMH Licensed No
CAMDENTON	MO 65020-7138	Region 6	Facility Number 30084
LAKE ST CHARLES ASSISTED LIV	ING APARTMENTS		
45 HONEY LOCUST LN		<b>Telephone</b> (636) 947-1100	Alzheimer's Unit No
SAINT CHARLES	MO 63303-5711	Level of Care: ALF	Bed Capacity 50
Mailing Address 45 HONEY LOCUST		County SAINT CHARLES	DMH Licensed No
SAINT CHARLES	MO 63303-5711	Region 5	Facility Number 18030

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I A ME CEOCHEON HEAT WHICH BE	E.A. CHI YOU		
LAKE STOCKTON HEALTHCARE	FACILITY	(417) 276 5126	A1 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
1523 3RD ROAD	110 (7707 0700	<b>Telephone</b> (417) 276-5126	Alzheimer's Unit Yes
STOCKTON	MO 65785-9608	Level of Care: SNF	Bed Capacity 90
Mailing Address PO BOX 945		County CEDAR	DMH Licensed No
STOCKTON	MO 65785-0945	Region 1 Medicare/Medicaid	Facility Number 07680
I AVECHODEC DECIDENTIAL CAR	NE EA CHI 10037		
LAKESHORES RESIDENTIAL CAR	Œ FACILII Y	M 1 1 (417) 754 2272	All I de la Tida
102 SOUTH BOLIVAR RD	NO 65674 0552	<b>Telephone</b> (417) 754-2272	Alzheimer's Unit No
HUMANSVILLE	MO 65674-8553	Level of Care: RCF*	Bed Capacity 30
Mailing Address PO BOX 221		County POLK	DMH Licensed Yes
HUMANSVILLE	MO 65674-0221	Region 1	Facility Number 15309
LAKESIDE MOUNTAIN MANOR			
238 HARMONY HEIGHTS		<b>Telephone</b> (417) 546-5595	Alzheimer's Unit No
FORSYTH	MO 65653-5533	Level of Care: RCF	Bed Capacity 40
Mailing Address 238 HARMONY HEI		County TANEY	DMH Licensed Yes
FORSYTH		·	
FORSTIH	MO 65653-5533	Region 1	Facility Number 06232
LAKESIDE SUITES			
205 TIMBERLINE DR		<b>Telephone</b> (660) 547-3322	Alzheimer's Unit No
LINCOLN	MO 65338-2007	Level of Care: ALF	Bed Capacity 14
Mailing Address 205 TIMBERLINE D	R	County BENTON	DMH Licensed No
LINCOLN	MO 65338-2007	Region 6	Facility Number 04803
		1109-01	- 1.1
LAKEVIEW HEALTH CARE & REI	HABILITATION CENTER		
1450 ASHLEY RD		<b>Telephone</b> (660) 882-7007	Alzheimer's Unit No
BOONVILLE	MO 65233-2141	Level of Care: ICF	<b>Bed Capacity</b> 19
Mailing Address 1450 ASHLEY RD		County COOPER	<b>DMH Licensed</b> No
BOONVILLE	MO 65233-2141	Region 6 Medicaid	Facility Number 01602
LAKEVIEW HEALTH CARE & REI	HADII ITATION CENTED		
1450 ASHLEY RD	HABILITATION CENTER	<b>Telephone</b> (660) 882-7007	Alzheimer's Unit No
BOONVILLE	MO 65233-2141	Level of Care: RCF*	Bed Capacity 17
	WO 03233-2141		- ·
Mailing Address 1450 ASHLEY RD	MO 65222 2141	County COOPER	DMH Licensed No Facility Number 01602
BOONVILLE	MO 65233-2141	Region 6	Facility Number 01602
LAKEVIEW HEALTH CARE & REI	HABILITATION CENTER		
1450 ASHLEY RD		<b>Telephone</b> (660) 882-7007	Alzheimer's Unit No
BOONVILLE	MO 65233-2141	Level of Care: SNF	<b>Bed Capacity</b> 60
Mailing Address 1450 ASHLEY RD		County COOPER	<b>DMH Licensed</b> No
BOONVILLE	MO 65233-2141	Region 6 Medicare/Medicaid	Facility Number 01602
		<u> </u>	
LAKEVIEW POST ACUTE		TI 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	All Post Web
1201 GARDEN PLAZA DR	MO (2022 2220	<b>Telephone</b> (314) 831-3752	Alzheimer's Unit No
FLORISSANT	MO 63033-2230	Level of Care: SNF	Bed Capacity 120
Mailing Address 1201 GARDEN PLAZ		County SAINT LOUIS COUNTY	DMH Licensed No
FLORISSANT	MO 63033-2230	Region 7 Medicare/Medicaid	Facility Number 27146

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LAKEWOOD - ASSISTED LIVING I	BY AMERICARE			
4685 ROBBERSON AVE		<b>Telephone</b> (417) 881-1411	Alzheimer's Unit	Yes
SPRINGFIELD	MO 65810-1785	Level of Care: ALF**	Bed Capacity	67
Mailing Address 4685 ROBBERSON A		County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65810-1785	Region 1	Facility Number	23613
LAMPLIGHT VILLAGE				
309 LOCUST ST		<b>Telephone</b> (417) 256-2749	Alzheimer's Unit	No
WEST PLAINS	MO 65775-3906	Level of Care: RCF*	Bed Capacity	32
Mailing Address PO BOX 166		County HOWELL	DMH Licensed	Yes
WEST PLAINS	MO 65775-0166	Region 2	Facility Number	21563
LANDING OF O'FALLON, THE		Tolonhomo (626) 660 0700	Alahaimania IIi4	<b>V</b>
1000 LANDING CIRCLE	MO (2204 7647	<b>Telephone</b> (636) 669-0780	Alzheimer's Unit	Yes
SAINT CHARLES	MO 63304-7647	Level of Care: ALF**	Bed Capacity	142
Mailing Address 1000 LANDING CIRC		County SAINT CHARLES	DMH Licensed	No
SAINT CHARLES	MO 63304-7647	Region 5	Facility Number	31181
LANDMARK VILLA ALF				
1101 OZARK AVE		<b>Telephone</b> (417) 962-3700	Alzheimer's Unit	No
CABOOL	MO 65689-7362	Level of Care: ALF	Bed Capacity	44
Mailing Address 1101 OZARK AVE	WO 03007-7302	County TEXAS	DMH Licensed	Yes
CABOOL	MO 65689-7362	Region 2		04085
CABOOL	WO 03007-7302	Kegion 2	racinty Number	04063
LANSDOWNE VILLAGE				
4624 LANSDOWNE AVE		<b>Telephone</b> (314) 351-6888	Alzheimer's Unit	No
SAINT LOUIS	MO 63116-1523	Level of Care: SNF	Bed Capacity	145
Mailing Address 4624 LANSDOWNE	AVE	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS	MO 63116-1523	Region 7 Medicare/Medicaid	Facility Number	14557
		and a second second		1 1007
LAURIE CARE CENTER				
610 HWY O		<b>Telephone</b> (573) 374-8263	Alzheimer's Unit	Yes
LAURIE	MO 65038-1068	Level of Care: SNF	Bed Capacity	108
Mailing Address PO BOX 1068		County MORGAN	DMH Licensed	No
LAURIE	MO 65038-1068	Region 6 Medicare/Medicaid	Facility Number	04449
1 AVIDAD VIVOT S				
LAURIE KNOLLS				
610 HIGHWAY O		<b>Telephone</b> (573) 374-8263	Alzheimer's Unit	No
LAURIE	MO 65038-1068	Level of Care: RCF*	Bed Capacity	66
Mailing Address PO BOX 1068		County MORGAN	DMH Licensed	No
LAURIE	MO 65038-1068	Region 6	Facility Number	04449
LAVERNA MANOR HEALTH & RE	CHARILITATION			
904 SOUTH HALL AVE		<b>Telephone</b> (816) 324-3185	Alzheimer's Unit	Yes
SAVANNAH	MO 64485-1952	Level of Care: SNF	Bed Capacity	120
Mailing Address 904 SOUTH HALL A		County ANDREW	DMH Licensed	No
SAVANNAH	MO 64485-1952	Region 4 Medicare/Medicaid		04478
	000 1/02	region · Micuical C/Micuicalu	- wearing 1 territori	U 1 T/U

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LAWRENCE COUNTY MANOR				
915 CARL ALLEN ST		<b>Telephone</b> (417) 466-2183	Alzheimer's Unit	Yes
MT VERNON	MO 65712-1612	Level of Care: SNF	Bed Capacity	90
Mailing Address 915 CARL ALLEN S'	T	County LAWRENCE	DMH Licensed	No
MT VERNON	MO 65712-1612	Region 1 Medicare/Medicaid	Facility Number 0	04349
LAWRENCE COUNTY RESIDENTI	AL CARE CENTER			
915 CARL ALLEN ST		<b>Telephone</b> (417) 466-2183	Alzheimer's Unit	No
MT VERNON	MO 65712-1612	Level of Care: RCF*	Bed Capacity	30
Mailing Address 915 CARL ALLEN S'		County LAWRENCE	DMH Licensed	No
MT VERNON	MO 65712-1612	Region 1		)4349
MI VERTOIT	110 03/12 1012	Region 1	racincy runner	77377
LAWSON MANOR & REHAB				
210 WEST 8TH TERRACE		<b>Telephone</b> (816) 580-3269	Alzheimer's Unit	Yes
LAWSON	MO 64062-9357	Level of Care: SNF	Bed Capacity	60
			DMH Licensed	No
Mailing Address 210 WEST 8TH TER		•		
LAWSON	MO 64062-9357	Region 4 Medicare/Medicaid	Facility Number 0	07395
LEBANON NORTH NURSING & RE	THAR			
596 MORTON RD	ZHAD	<b>Telephone</b> (417) 532-9173	Alzheimer's Unit	Yes
LEBANON	MO 65536-3648	Level of Care: SNF		180
	MO 03330-3048		Bed Capacity	
Mailing Address 596 MORTON RD	MO 65526 2649	County LACLEDE	DMH Licensed	No
LEBANON	MO 65536-3648	Region 1 Medicare/Medicaid	Facility Number 0	04369
LEBANON SOUTH NURSING & RE	CHAB			
514 WEST FREMONT ROAD		<b>Telephone</b> (417) 532-5351	Alzheimer's Unit	No
LEBANON	MO 65536-4244	Level of Care: SNF	Bed Capacity	116
Mailing Address 514 WEST FREMON		County LACLEDE	DMH Licensed	No
LEBANON	MO 65536-4244	Region 1 Medicare/Medicaid		15650
BBTILVOIV		region 1 Medicare/Medicard	Tuesday I value of	.5050
LEBANON SOUTH NURSING & RE	HAB			
514 WEST FREMONT RD		<b>Telephone</b> (417) 532-5351	Alzheimer's Unit	No
LEBANON	MO 65536-4244	Level of Care: RCF	Bed Capacity	68
Mailing Address 514 WEST FREMON	TT ROAD	County LACLEDE	DMH Licensed	No
LEBANON	MO 65536-4244	Region 1	Facility Number 1	15650
		Ü		
LEE HOUSE SENIOR LIVING LLC				
105 NORTH MILL ST		<b>Telephone</b> (573) 392-5558	Alzheimer's Unit	No
ELDON	MO 65026-1728	Level of Care: RCF	<b>Bed Capacity</b>	53
Mailing Address 105 NORTH MILL ST	Т	County MILLER	DMH Licensed	No
ELDON	MO 65026-1728	Region 6	Facility Number 1	13089
LEE'S SUMMIT PLACE		m 1 1 2 2000	A1 1	N
1501 SW 3RD ST	1.50 51001 0101	<b>Telephone</b> (816) 525-6300	Alzheimer's Unit	No
LEE'S SUMMIT	MO 64081-2424	Level of Care: SNF	Bed Capacity	60
Mailing Address 1501 SW 3RD ST		County JACKSON	DMH Licensed	No
LEE'S SUMMIT	MO 64081-2424	Region 3 Medicare/Medicaid	Facility Number 1	12484

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LEGENDARY NURSING & REHAB	ILITATION LLC			
809 EAST GORDON ST		<b>Telephone</b> (660) 886-2247	Alzheimer's Unit	No
MARSHALL	MO 65340-2811	Level of Care: SNF	<b>Bed Capacity</b>	92
Mailing Address 809 EAST GORDON	ST	County SALINE	DMH Licensed	No
MARSHALL	MO 65340-2811	Region 5 Medicare/Medicaid	Facility Number	04895
I BIGUIDE I MINIG				
LEISURE LIVING		m		
305 5TH ST	MO 65709 2212	<b>Telephone</b> (417) 235-5959	Alzheimer's Unit	No
MONETT 205 5TH ST	MO 65708-2312	Level of Care: RCF	Bed Capacity	20
Mailing Address 305 5TH ST	MO 65709 2212	County BARRY	DMH Licensed	Yes
MONETT	MO 65708-2312	Region 1	Facility Number	18227
LEMAY NURSING				
9353 SOUTH BROADWAY		<b>Telephone</b> (314) 631-0540	Alzheimer's Unit	No
SAINT LOUIS	MO 63125-1600	Level of Care: SNF	Bed Capacity	60
Mailing Address 9353 SOUTH BROA	DWAY	County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63125-1600	Region 7 Medicare/Medicaid	Facility Number	01732
LENOIR HEALTH CARE CENTER				
3850 CARTWRIGHT LANE		<b>Telephone</b> (573) 876-5800	Alzheimer's Unit	No
COLUMBIA	MO 65201-7779	Level of Care: SNF	<b>Bed Capacity</b>	100
Mailing Address 3850 CARTWRIGHT	T LANE	County BOONE	DMH Licensed	No
COLUMBIA	MO 65201-7779	Region 6 Medicare/Medicaid	Facility Number	04750
LENOIR MANOR				
3850 CARTWRIGHT LANE		<b>Telephone</b> (573) 876-5800	Alzheimer's Unit	Yes
COLUMBIA	MO 65201-	Level of Care: ALF**	Bed Capacity	92
Mailing Address 3850 CARTWRIGHT		County BOONE	DMH Licensed	No
COLUMBIA	MO 65201-	Region 6	Facility Number	04750
	3.20	region o		01750
A FONA WOUGE				
LEONA HOUSE 5000 NW OLD TRAIL ROAD		<b>Telephone</b> (816) 584-1033	Alzheimer's Unit	Vas
KANSAS CITY	MO 64151-1946	Telephone (816) 584-1033 Level of Care: ALF**		Yes 7
			Bed Capacity  DMH Licensed	
Mailing Address 5000 NW OLD TRAI KANSAS CITY	MO 64151-1946	County PLATTE	Facility Number	No 24748
KANSAS CII I	WIO 04131-1940	Region 4	racinty Number	24/46
LEVERING REGIONAL HEALTH (	CARE CENTER			
1734 MARKET ST		<b>Telephone</b> (573) 221-2930	Alzheimer's Unit	No
HANNIBAL	MO 63401-4025	Level of Care: RCF*	Bed Capacity	35
Mailing Address 1734 MARKET ST		County MARION	DMH Licensed	Yes
HANNIBAL	MO 63401-4025	Region 5	Facility Number	15954
LEWIS & CLARK GARDENS				
1221 BOONES LICK RD		<b>Telephone</b> (636) 946-6140	Alzheimer's Unit	No
SAINT CHARLES	MO 63301-2328	Level of Care: SNF	Bed Capacity	142
Mailing Address 1221 BOONES LICK		County SAINT CHARLES	DMH Licensed	No
SAINT CHARLES	MO 63301-2328	Region 5 Medicare/Medicaid	Facility Number	01266

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LEWIS COUNTY NURSING HOME	DISTRICT			
17528 STATE HIGHWAY 81 N		<b>Telephone</b> (573) 288-4454	Alzheimer's Unit	Yes
CANTON	MO 63435-3463	Level of Care: SNF	<b>Bed Capacity</b>	120
Mailing Address PO BOX 266		County LEWIS	DMH Licensed	No
CANTON	MO 63435-0266	Region 5 Medicare/Medicaid	<b>Facility Number</b>	04790
LIBERTY HEALTH AND WELLNE	66			
2201 GLENN HENDREN DR	33	<b>Telephone</b> (816) 736-8800	Alzheimer's Unit	No
LIBERTY	MO 64068-3375	Telephone (816) 736-8800 Level of Care: SNF	Bed Capacity	143
Mailing Address 2201 GLENN HEND		County CLAY	DMH Licensed	No
LIBERTY	MO 64068-3375			
LIBERTT	WO 04008-3373	Region 4 Medicare/Medicaid	Facility Number	16715
LICKING RESIDENTIAL CARE		T. I. I. (572) 574 2207		3.7
225 WEST HIGHWAY 32	140 - 477 40 0000	<b>Telephone</b> (573) 674-2207	Alzheimer's Unit	No
LICKING	MO 65542-9832	Level of Care: RCF*	Bed Capacity	34
Mailing Address 225 WEST HIGHWA		County TEXAS	DMH Licensed	No
LICKING	MO 65542-9832	Region 2	Facility Number	24302
LIFE CARE CENTER OF BRIDGET	TON			
12145 BRIDGETON SQUARE DR		<b>Telephone</b> (314) 298-7444	Alzheimer's Unit	No
BRIDGETON	MO 63044-2616	Level of Care: SNF	Bed Capacity	91
Mailing Address 12145 BRIDGETON	-	County SAINT LOUIS COUNTY	DMH Licensed	No
BRIDGETON	MO 63044-2616	Region 7 Medicare/Medicaid	Facility Number	12141
LIFE CARE CENTER OF BROOKF	IELD			
315 HUNT ST		<b>Telephone</b> (660) 258-3367	Alzheimer's Unit	Yes
BROOKFIELD	MO 64629 2412	Lovel of Comes CME		
	MO 64628-2412	Level of Care: SNF	Bed Capacity	120
Mailing Address 315 HUNT ST		County LINN	DMH Licensed	No
Mailing Address 315 HUNT ST BROOKFIELD	MO 64628-2412		• •	
BROOKFIELD	MO 64628-2412	County LINN	DMH Licensed	No
BROOKFIELD  LIFE CARE CENTER OF CAPE GIT	MO 64628-2412	County LINN Region 5 Medicare/Medicaid	DMH Licensed Facility Number	No 00822
BROOKFIELD  LIFE CARE CENTER OF CAPE GIR 365 SOUTH BROADVIEW ST	MO 64628-2412 RARDEAU	County LINN Region 5 Medicare/Medicaid  Telephone (573) 335-2086	DMH Licensed Facility Number  Alzheimer's Unit	No 00822 No
BROOKFIELD  LIFE CARE CENTER OF CAPE GIT 365 SOUTH BROADVIEW ST CAPE GIRARDEAU	MO 64628-2412  RARDEAU  MO 63703-5725	County LINN Region 5 Medicare/Medicaid  Telephone (573) 335-2086 Level of Care: SNF	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	No 00822 No 120
BROOKFIELD  LIFE CARE CENTER OF CAPE GIR 365 SOUTH BROADVIEW ST CAPE GIRARDEAU  Mailing Address 365 SOUTH BROAD	MO 64628-2412  RARDEAU  MO 63703-5725  DVIEW ST	County LINN Region 5 Medicare/Medicaid  Telephone (573) 335-2086 Level of Care: SNF County CAPE GIRARDEAU	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	No 00822 No 120 No
BROOKFIELD  LIFE CARE CENTER OF CAPE GIT 365 SOUTH BROADVIEW ST CAPE GIRARDEAU	MO 64628-2412  RARDEAU  MO 63703-5725	County LINN Region 5 Medicare/Medicaid  Telephone (573) 335-2086 Level of Care: SNF	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	No 00822 No 120
BROOKFIELD  LIFE CARE CENTER OF CAPE GIT 365 SOUTH BROADVIEW ST CAPE GIRARDEAU  Mailing Address 365 SOUTH BROAD CAPE GIRARDEAU	MO 64628-2412  RARDEAU  MO 63703-5725  DVIEW ST  MO 63703-5725	County LINN Region 5 Medicare/Medicaid  Telephone (573) 335-2086 Level of Care: SNF County CAPE GIRARDEAU	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	No 00822 No 120 No
BROOKFIELD  LIFE CARE CENTER OF CAPE GIT 365 SOUTH BROADVIEW ST CAPE GIRARDEAU  Mailing Address 365 SOUTH BROAD CAPE GIRARDEAU  LIFE CARE CENTER OF CARROL	MO 64628-2412  RARDEAU  MO 63703-5725  DVIEW ST  MO 63703-5725	County LINN Region 5 Medicare/Medicaid  Telephone (573) 335-2086 Level of Care: SNF County CAPE GIRARDEAU Region 2 Medicare/Medicaid	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 00822 No 120 No 01032
BROOKFIELD  LIFE CARE CENTER OF CAPE GID 365 SOUTH BROADVIEW ST CAPE GIRARDEAU  Mailing Address 365 SOUTH BROAD CAPE GIRARDEAU  LIFE CARE CENTER OF CARROL 300 LIFE CARE LN	MO 64628-2412  RARDEAU  MO 63703-5725  DVIEW ST  MO 63703-5725  LTON	County LINN Region 5 Medicare/Medicaid  Telephone (573) 335-2086 Level of Care: SNF County CAPE GIRARDEAU Region 2 Medicare/Medicaid  Telephone (660) 542-0155	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 00822 No 120 No 01032
BROOKFIELD  LIFE CARE CENTER OF CAPE GIT 365 SOUTH BROADVIEW ST CAPE GIRARDEAU  Mailing Address 365 SOUTH BROAD CAPE GIRARDEAU  LIFE CARE CENTER OF CARROL 300 LIFE CARE LN CARROLLTON	MO 64628-2412  RARDEAU  MO 63703-5725  DVIEW ST  MO 63703-5725	County LINN Region 5 Medicare/Medicaid  Telephone (573) 335-2086 Level of Care: SNF County CAPE GIRARDEAU Region 2 Medicare/Medicaid  Telephone (660) 542-0155 Level of Care: SNF	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	No 00822 No 120 No 01032 Yes 120
BROOKFIELD  LIFE CARE CENTER OF CAPE GID 365 SOUTH BROADVIEW ST CAPE GIRARDEAU  Mailing Address 365 SOUTH BROAD CAPE GIRARDEAU  LIFE CARE CENTER OF CARROL 300 LIFE CARE LN	MO 64628-2412  RARDEAU  MO 63703-5725  DVIEW ST  MO 63703-5725  LTON  MO 64633-1861	County LINN Region 5 Medicare/Medicaid  Telephone (573) 335-2086 Level of Care: SNF County CAPE GIRARDEAU Region 2 Medicare/Medicaid  Telephone (660) 542-0155	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	No 00822 No 120 No 01032
BROOKFIELD  LIFE CARE CENTER OF CAPE GIT 365 SOUTH BROADVIEW ST CAPE GIRARDEAU  Mailing Address 365 SOUTH BROAD CAPE GIRARDEAU  LIFE CARE CENTER OF CARROL 300 LIFE CARE LN CARROLLTON	MO 64628-2412  RARDEAU  MO 63703-5725  DVIEW ST  MO 63703-5725  LTON	County LINN Region 5 Medicare/Medicaid  Telephone (573) 335-2086 Level of Care: SNF County CAPE GIRARDEAU Region 2 Medicare/Medicaid  Telephone (660) 542-0155 Level of Care: SNF	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	No 00822 No 120 No 01032 Yes 120
LIFE CARE CENTER OF CAPE GIT 365 SOUTH BROADVIEW ST CAPE GIRARDEAU  Mailing Address 365 SOUTH BROAD CAPE GIRARDEAU  LIFE CARE CENTER OF CARROL 300 LIFE CARE LN CARROLLTON  Mailing Address 300 LIFE CARE LN CARROLLTON	MO 64628-2412  RARDEAU  MO 63703-5725  DVIEW ST  MO 63703-5725  LTON  MO 64633-1861  MO 64633-1861	County LINN Region 5 Medicare/Medicaid  Telephone (573) 335-2086 Level of Care: SNF County CAPE GIRARDEAU Region 2 Medicare/Medicaid  Telephone (660) 542-0155 Level of Care: SNF County CARROLL	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	No 00822 No 120 No 01032 Yes 120 No
LIFE CARE CENTER OF CAPE GIT 365 SOUTH BROADVIEW ST CAPE GIRARDEAU  Mailing Address 365 SOUTH BROAD CAPE GIRARDEAU  LIFE CARE CENTER OF CARROL 300 LIFE CARE LN CARROLLTON  Mailing Address 300 LIFE CARE LN CARROLLTON  LIFE CARE CENTER OF GRANDV	MO 64628-2412  RARDEAU  MO 63703-5725  DVIEW ST  MO 63703-5725  LTON  MO 64633-1861  MO 64633-1861	County LINN Region 5 Medicare/Medicaid  Telephone (573) 335-2086 Level of Care: SNF County CAPE GIRARDEAU Region 2 Medicare/Medicaid  Telephone (660) 542-0155 Level of Care: SNF County CARROLL Region 4 Medicare/Medicaid	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 00822 No 120 No 01032 Yes 120 No 11500
LIFE CARE CENTER OF CAPE GIT 365 SOUTH BROADVIEW ST CAPE GIRARDEAU  Mailing Address 365 SOUTH BROAD CAPE GIRARDEAU  LIFE CARE CENTER OF CARROL 300 LIFE CARE LN CARROLLTON  Mailing Address 300 LIFE CARE LN CARROLLTON  LIFE CARE CENTER OF GRANDV 6301 EAST 125TH ST	MO 64628-2412  RARDEAU  MO 63703-5725  DVIEW ST  MO 63703-5725  LTON  MO 64633-1861  MO 64633-1861  IEW	County LINN Region 5 Medicare/Medicaid  Telephone (573) 335-2086 Level of Care: SNF County CAPE GIRARDEAU Region 2 Medicare/Medicaid  Telephone (660) 542-0155 Level of Care: SNF County CARROLL Region 4 Medicare/Medicaid  Telephone (816) 765-7714	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 00822 No 120 No 01032 Yes 120 No 11500
LIFE CARE CENTER OF CAPE GIVE 365 SOUTH BROADVIEW ST CAPE GIRARDEAU Mailing Address 365 SOUTH BROAD CAPE GIRARDEAU  LIFE CARE CENTER OF CARROL 300 LIFE CARE LN CARROLLTON Mailing Address 300 LIFE CARE LN CARROLLTON  LIFE CARE CENTER OF GRANDV 6301 EAST 125TH ST GRANDVIEW	MO 64628-2412  RARDEAU  MO 63703-5725  DVIEW ST  MO 63703-5725  LTON  MO 64633-1861  MO 64633-1861  IEW  MO 64030-1884	County LINN Region 5 Medicare/Medicaid  Telephone (573) 335-2086 Level of Care: SNF County CAPE GIRARDEAU Region 2 Medicare/Medicaid  Telephone (660) 542-0155 Level of Care: SNF County CARROLL Region 4 Medicare/Medicaid  Telephone (816) 765-7714 Level of Care: SNF	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 00822 No 120 No 01032 Yes 120 No 11500
LIFE CARE CENTER OF CAPE GIT 365 SOUTH BROADVIEW ST CAPE GIRARDEAU  Mailing Address 365 SOUTH BROAD CAPE GIRARDEAU  LIFE CARE CENTER OF CARROL 300 LIFE CARE LN CARROLLTON  Mailing Address 300 LIFE CARE LN CARROLLTON  LIFE CARE CENTER OF GRANDV 6301 EAST 125TH ST	MO 64628-2412  RARDEAU  MO 63703-5725  DVIEW ST  MO 63703-5725  LTON  MO 64633-1861  MO 64633-1861  IEW  MO 64030-1884	County LINN Region 5 Medicare/Medicaid  Telephone (573) 335-2086 Level of Care: SNF County CAPE GIRARDEAU Region 2 Medicare/Medicaid  Telephone (660) 542-0155 Level of Care: SNF County CARROLL Region 4 Medicare/Medicaid  Telephone (816) 765-7714	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 00822 No 120 No 01032 Yes 120 No 11500

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LIFE CARE CENTER OF ST LOUIS	\$			
3520 CHOUTEAU AVE		<b>Telephone</b> (314) 771-2100	Alzheimer's Unit	No
SAINT LOUIS	MO 63103-2916	Level of Care: SNF	Bed Capacity	100
Mailing Address 3520 CHOUTEAU A	VE	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS	MO 63103-2916	Region 7 Medicare/Medicaid	Facility Number	19823
LIFE CARE CENTER OF SULLIVA	N			
875 DUNSFORD DR		<b>Telephone</b> (573) 468-3128	Alzheimer's Unit	No
SULLIVAN	MO 63080-1238	Level of Care: SNF	Bed Capacity	120
Mailing Address 875 DUNSFORD DR		County FRANKLIN	DMH Licensed	No
SULLIVAN	MO 63080-1238	Region 6 Medicare/Medicaid	Facility Number	07744
LIFE CARE CENTER OF WAYNES	VILLE	T. 1 . 1 . (572) 774 (45)	A11 1	37
700 BIRCH LN	MO (5592 2275	<b>Telephone</b> (573) 774-6456	Alzheimer's Unit	Yes
WAYNESVILLE	MO 65583-2275	Level of Care: SNF	Bed Capacity	120
Mailing Address 700 BIRCH LN	MO 65502 2275	County PULASKI	DMH Licensed	No
WAYNESVILLE	MO 65583-2275	Region 6 Medicare/Medicaid	Facility Number	04592
LIFE ENHANCEMENT VILLAGE O	OF THE OZARKS INC			
732 SOUTH GREGG ROAD		<b>Telephone</b> (417) 725-5166	Alzheimer's Unit	No
NIXA	MO 65714-7419	Level of Care: RCF*	Bed Capacity	44
Mailing Address 732 SOUTH GREGG		County CHRISTIAN	DMH Licensed	Yes
NIXA	MO 65714-7419	Region 1	Facility Number	14190
		Region 1	Tuemey Tumber	14170
LINCOLN COMMUNITY CARE CE	NTER			
205 TIMBERLINE DR		<b>Telephone</b> (660) 547-3322	Alzheimer's Unit	No
LINCOLN	MO 65338-2007	Level of Care: SNF	<b>Bed Capacity</b>	66
Mailing Address 205 TIMBERLINE D	R	County BENTON	DMH Licensed	No
LINCOLN	MO 65338-2007	Region 6 Medicare/Medicaid	Facility Number	04803
LINCOLN COUNTY NUDGING & D	EHAD			
LINCOLN COUNTY NURSING & RI 1145 EAST CHERRY STREET	ЕНАВ	<b>Telephone</b> (636) 528-5712	Alzheimer's Unit	No
TROY	MO 63379-1520	Level of Care: SNF	Bed Capacity	90
Mailing Address 1145 EAST CHERRY		County LINCOLN	DMH Licensed	No
TROY	MO 63379-1520	Region 5 Medicare/Medicaid	Facility Number	15750
IKOI	WIO 03317-1320	Region 5 Medical e/Medicald	racinty (uniber	13730
LINDEN WOODS VILLAGE				
2901 NE 72ND STREET		<b>Telephone</b> (816) 268-4000	Alzheimer's Unit	No
GLADSTONE	MO 64119-7400	Level of Care: ALF**	Bed Capacity	40
Mailing Address 2901 NE 72ND STRE	EET	County CLAY	DMH Licensed	No
GLADSTONE	MO 64119-7400	Region 4	Facility Number	30156
I DIDEN WOODS VIVE A SE				
LINDEN WOODS VILLAGE		Tolonhono (016) 269 4000	Alzhaimanla II4	NT =
2901 NE 72ND STREET GLADSTONE	MO 64119 7400	Telephone (816) 268-4000 Level of Care: SNF	Alzheimer's Unit	No 40
Mailing Address 2901 NE 72ND STRE	MO 64119-7400	County CLAY	Bed Capacity DMH Licensed	No
GLADSTONE		•		
GLADSTONE	MO 64119-7400	Region 4 Medicare/Medicaid	Facility Number	30156

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LIVING CENTER, THE			
2506 LINDEN TREE PARKWAY		<b>Telephone</b> (660) 886-9676	Alzheimer's Unit Yes
MARSHALL	MO 65340-0017	Level of Care: SNF	<b>Bed Capacity</b> 99
Mailing Address PO BOX 370		County SALINE	DMH Licensed No
MARSHALL	MO 65340-0370	Region 5 Medicare/Medicaid	Facility Number 21791
I WING COMMINUM OF CO LOCK	DIA		
LIVING COMMUNITY OF ST JOSE 1202 HEARTLAND RD	rn	The Late (916) 671 9500	Alzheimer's Unit No
	MO (450( 2200	<b>Telephone</b> (816) 671-8500	
SAINT JOSEPH	MO 64506-3200	Level of Care: SNF	Bed Capacity 96
Mailing Address 1202 HEARTLAND F		County BUCHANAN	DMH Licensed No
SAINT JOSEPH	MO 64506-3200	Region 4 Medicare/Medicaid	Facility Number 24179
LIVING COMMUNITY OF ST JOSE	PH	m 1 1 (010) (71 050)	
1202 HEARTLAND RD		<b>Telephone</b> (816) 671-8500	Alzheimer's Unit No
SAINT JOSEPH	MO 64506-3200	Level of Care: ALF**	Bed Capacity 35
Mailing Address 1202 HEARTLAND F		County BUCHANAN	<b>DMH Licensed</b> No
SAINT JOSEPH	MO 64506-3200	Region 4	Facility Number 24179
LIVING LIFE LONG RESIDENTIAL	L CARE, LLC		
5076 WATERMAN		<b>Telephone</b> (314) 495-5498	Alzheimer's Unit No
SAINT LOUIS	MO 63108-1102	Level of Care: RCF	Bed Capacity 20
Mailing Address 303 UNION BLVD		County SAINT LOUIS CITY	<b>DMH Licensed</b> Yes
SAINT LOUIS	MO 63108-4400	Region 7	Facility Number 05212
LIVINGSTON MANOR CARE CENT	TER		
939 E BIRCH DR		<b>Telephone</b> (660) 646-5177	Alzheimer's Unit Yes
CHILLICOTHE	MO 64601-2189	Level of Care: SNF	<b>Bed Capacity</b> 94
Mailing Address 939 E BIRCH DR		County LIVINGSTON	<b>DMH Licensed</b> No
CHILLICOTHE	MO 64601-2189	Region 4 Medicare/Medicaid	Facility Number 20099
LOCH HAVEN			
701 SUNSET HILLS DR	MO	<b>Telephone</b> (660) 385-3113	Alzheimer's Unit Yes
MACON	MO 63552-2165	Level of Care: SNF	Bed Capacity 100
Mailing Address PO BOX 187		County MACON	DMH Licensed No
MACON	MO 63552-0187	Region 5 Medicare/Medicaid	Facility Number 04739
LOCH HAVEN			
701 SUNSET HILLS DR		<b>Telephone</b> (660) 385-3113	Alzheimer's Unit No
MACON	MO 63552-2165	Level of Care: RCF*	<b>Bed Capacity</b> 26
Mailing Address PO BOX 187		County MACON	<b>DMH Licensed</b> No
MACON	MO 63552-0187	Region 5	Facility Number 04739
LODGE RESIDENTIAL CARE FACI	ILITY, THE		
3860 EAST 60TH ST		<b>Telephone</b> (816) 599-5235	Alzheimer's Unit No
KANSAS CITY	MO 64130-4418	Level of Care: RCF	<b>Bed Capacity</b> 8
Mailing Address 3860 EAST 60TH ST		County JACKSON	<b>DMH Licensed</b> No

**Facility Number** 

16211

MO 64130-4418

KANSAS CITY

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LODGE, THE				
542 STATE ROAD DD		<b>Telephone</b> (660) 248-2277	Alzheimer's Unit	No
FAYETTE	MO 65248-9658	Level of Care: ALF**	<b>Bed Capacity</b>	60
Mailing Address 542 STATE RD DD		County HOWARD	DMH Licensed	Yes
FAYETTE	MO 65248-9658	Region 5	Facility Number	28815
LODGES, THE				
2401 W GRAND ST		<b>Telephone</b> (417) 864-4545	Alzheimer's Unit	No
SPRINGFIELD	MO 65802-4967	Level of Care: RCF*	Bed Capacity	99
Mailing Address 2401 W GRAND ST		County GREENE	DMH Licensed	Yes
SPRINGFIELD	MO 65802-4967	Region 1	Facility Number	09756
LOVING ARMS MEMORY CARE AN	ND ASSISTED LIVING			
1300 EAST 24TH STREET	AD ABSISTED LIVING	<b>Telephone</b> (660) 851-2266	Alzheimer's Unit	Yes
SEDALIA	MO 65301-8233	Level of Care: ALF**	Bed Capacity	20
Mailing Address 2700 ARTISAN DRIV		County PETTIS	DMH Licensed	No
SEDALIA	MO 65301-8233	Region 6	Facility Number	15971
		Region		13771
LUTHER MANOR RETIREMENT &	NURSING CENTER	m (570) 201 5500		
3170 HIGHWAY 61 NORTH	NO (2401 (571	<b>Telephone</b> (573) 221-5533	Alzheimer's Unit	No
HANNIBAL	MO 63401-6571	Level of Care: SNF	Bed Capacity	64 N
Mailing Address 3170 HIGHWAY 61 N		County MARION	DMH Licensed	No
HANNIBAL	MO 63401-6571	Region 5 Medicare/Medicaid	Facility Number	04673
LUTHERAN CONVALESCENT HOM	1E			
723 SOUTH LACLEDE STATION RD		<b>Telephone</b> (314) 968-5570	Alzheimer's Unit	No
WEBSTER GROVES	MO 63119-4911	Level of Care: SNF	Bed Capacity	286
Mailing Address 723 SOUTH LACLED	E STATION RD	County SAINT LOUIS COUNTY	DMH Licensed	No
WEBSTER GROVES	MO 63119-4911	Region 7 Medicare/Medicaid	Facility Number	04695
LUTHERAN GOOD SHEPHERD HO	ME			
202 S WEST ST		<b>Telephone</b> (660) 463-2267	Alzheimer's Unit	NO
CONCORDIA	MO 64020-9643	Level of Care: ALF**	Bed Capacity	53
Mailing Address PO BOX 849		County LAFAYETTE	DMH Licensed	No
CONCORDIA	MO 64020-0849	Region 3	Facility Number	04705
LUTHERAN HOME ASSISTED LIVE	NG			
2825 BLOOMFIELD RD		<b>Telephone</b> (573) 335-0158	Alzheimer's Unit	No
CAPE GIRARDEAU	MO 63703-6335	Level of Care: ALF**	<b>Bed Capacity</b>	115
Mailing Address 2825 BLOOMFIELD F	RD	County CAPE GIRARDEAU	DMH Licensed	No
CAPE GIRARDEAU	MO 63703-6335	Region 2	Facility Number	13536
LUTHERAN HOME, THE				
2825 BLOOMFIELD RD		<b>Telephone</b> (573) 335-0158	Alzheimer's Unit	Yes
CAPE GIRARDEAU	MO 63703-6335	Level of Care: SNF	Bed Capacity	274
Mailing Address 2825 BLOOMFIELD F	RD	County CAPE GIRARDEAU	DMH Licensed	No

Medicare/Medicaid

**Facility Number** 

13536

MO 63703-6335

CAPE GIRARDEAU

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LUTHERAN NURSING HOME			
202 S WEST ST		<b>Telephone</b> (660) 463-2267	Alzheimer's Unit Yes
CONCORDIA	MO 64020-9643	Level of Care: SNF	<b>Bed Capacity</b> 113
Mailing Address PO BOX 849		County LAFAYETTE	<b>DMH Licensed</b> No
CONCORDIA	MO 64020-0849	Region 3 Medicare/Medicaid	Facility Number 04705
LUTHERAN SENIOR SERVICES AT	Γ RRFF7F PARK		
600 BREEZE PARK DR	T DREEZE I MAK	<b>Telephone</b> (636) 939-5223	Alzheimer's Unit Yes
SAINT CHARLES	MO 63304-9139	Level of Care: ALF**	Bed Capacity 79
Mailing Address 600 BREEZE PARK		County SAINT CHARLES	DMH Licensed No
SAINT CHARLES	MO 63304-9139	Region 5	Facility Number 20704
SARVI CHARLES	1410 03304 7137	Acgion 5	racinty Number 20704
LUTHERAN SENIOR SERVICES AT	Γ BREEZE PARK		
600 BREEZE PARK DR		<b>Telephone</b> (636) 939-5223	Alzheimer's Unit No
SAINT CHARLES	MO 63304-9139	Level of Care: SNF	Bed Capacity 81
Mailing Address 600 BREEZE PARK	DR	County SAINT CHARLES	DMH Licensed No
SAINT CHARLES	MO 63304-9139	Region 5 Medicare/Medicaid	Facility Number 20704
LUTHERAN SENIOR SERVICES AT	r medame <i>c</i> di hees		
50 MERAMEC TRAIL DR	I MERAMEC BLUFFS	T-1h (626) 961 0600	Alzheimer's Unit Yes
BALLWIN	MO 63021-3303	<b>Telephone</b> (636) 861-0600 <b>Level of Care:</b> ALF**	
			Bed Capacity 100  DMH Licensed No
Mailing Address 50 MERAMEC TRAI BALLWIN	MO 63021-3303		
DALLWIN	WO 03021-3303	Region 7	Facility Number 23643
LUTHERAN SENIOR SERVICES AT	Γ MERAMEC BLUFFS		
50 MERAMEC TRAIL DR		<b>Telephone</b> (636) 861-0600	Alzheimer's Unit Yes
BALLWIN	MO 63021-3303	Level of Care: SNF	Bed Capacity 128
Mailing Address 50 MERAMEC TRAI		County SAINT LOUIS COUNTY	<b>DMH Licensed</b> No
BALLWIN	MO 63021-3303	Region 7 Medicare/Medicaid	Facility Number 23643
LUXE LIFE SENIOR LIVING			
111 MOCK AVE		<b>Telephone</b> (816) 220-4200	Alzheimer's Unit No
BLUE SPRINGS	MO 64014-2504	Level of Care: ALF**	<b>Bed Capacity</b> 57
Mailing Address 111 MOCK AVE		County JACKSON	DMH Licensed No
BLUE SPRINGS	MO 64014-2504	Region 3	Facility Number 13219
I VDI			
LYBL 1325 SOUTH HIGHLAND COURT		Tolonkono (660) 520 7001	Alabaimant- II-it
MARSHALL	MO 65340-3058	Telephone (660) 530-7081 Level of Care: RCF	Alzheimer's Unit No Bed Capacity 11
Mailing Address 1325 SOUTH HIGHL		County SALINE	DMH Licensed No
MARSHALL	MO 65340-3058	Region 5	Facility Number 03558
LYNN'S HERITAGE HOUSE, INC			
800 KELLY LN		<b>Telephone</b> (573) 754-4020	<b>Alzheimer's Unit</b> Yes
LOUISIANA	MO 63353-2415	Level of Care: ALF**	<b>Bed Capacity</b> 44
Mailing Address 800 KELLY LN		County PIKE	<b>DMH Licensed</b> No
LOUISIANA	MO 63353-2415	Region 5	Facility Number 21055

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MACON HEALTH CARE CENTER	TILL (CO) 205 5707
29612 KELLOGG AVE	Telephone (660) 385-5797 Alzheimer's Unit Yes To Level of Care: SNF Bed Capacity 120
MACON MO 63552-3' Mailing Address PO BOX 465	102 Level of Care: SNF Bed Capacity 120 County MACON DMH Licensed No
MACON MO 63552-0	•
MACON MIO 05552-0	65 Region 5 Medicare/Medicaid Facility Number 04914
MADISON SENIOR LIVING THE	
14001 MADISON AVENUE	<b>Telephone</b> 816-627-1726 <b>Alzheimer's Unit</b> Yes
KANSAS CITY MO 64145-1	
Mailing Address 14001 MADISON AVENUE	County JACKSON DMH Licensed No
KANSAS CITY MO 64145-10	<b>Region</b> 3 <b>Facility Number</b> 32321
MAGNOLIA HOUSE	
204 GRAND AVE	Telephone (636) 933-0662 Alzheimer's Unit No
FESTUS MO 63028-13	• • • • • • • • • • • • • • • • • • • •
Mailing Address 204 GRAND AVE	County JEFFERSON DMH Licensed Yes
FESTUS MO 63028-1	·
MAGNOLIA SQUARE NURSING AND REHAB	
1502 WEST EDGEWOOD	Telephone (417) 877-7545 Alzheimer's Unit No
SPRINGFIELD MO 65807-3:	
Mailing Address 1502 WEST EDGEWOOD	County GREENE DMH Licensed No
SPRINGFIELD MO 65807-3:	Region 1 Medicare/Medicaid Facility Number 23400
MANCHESTER REHAB AND HEALTHCARE CEN	TER
312 SOLLEY DR	Telephone (636) 391-0666 Alzheimer's Unit NO
BALLWIN MO 63021-52	Level of Care: SNF Bed Capacity 137
Mailing Address 312 SOLLEY DR	County SAINT LOUIS COUNTY DMH Licensed No
BALLWIN MO 63021-5	Region 7 Medicare/Medicaid Facility Number 04970
MANOR AT ELFINDALE, THE	
1707 WEST ELFINDALE ST	<b>Telephone</b> (417) 831-2273 <b>Alzheimer's Unit</b> Yes
SPRINGFIELD MO 65807-12	Level of Care: SNF Bed Capacity 100
Mailing Address 1707 WEST ELFINDALE ST	County GREENE DMH Licensed No
SPRINGFIELD MO 65807-1:	Region 1 Medicare Facility Number 17371
MANOR GROVE, INCORPORATED	
711 SOUTH KIRKWOOD RD	Telephone (314) 965-0864 Alzheimer's Unit No
KIRKWOOD MO 63122-59	
Mailing Address 711 SOUTH KIRKWOOD RD	County SAINT LOUIS COUNTY DMH Licensed No
KIRKWOOD MO 63122-59	
MANOR, THE	
2071 BARRON RD	<b>Telephone</b> (573) 686-1147 <b>Alzheimer's Unit</b> No
POPLAR BLUFF MO 63901-19	
Mailing Address 2071 BARRON RD	County BUTLER DMH Licensed No
POPLAR BLUFF MO 63901-19	Region 2 Medicare/Medicaid Facility Number 00683

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MAN E CRECE MANOR					
MAPLE CREST MANOR		<b></b>	(572) 224 2662	A11.	
430 NORTH FREDERICK STREET	0 (2501 4025	Telephone	(573) 334-2662	Alzheimer's Unit	No
	O 63701-4835	Level of Care:	RCF*	Bed Capacity	48
Mailing Address 430 NORTH FREDERICK			PE GIRARDEAU	DMH Licensed	Yes
CAPE GIRARDEAU MO	O 63701-4835	Region 2		Facility Number	03628
MAPLE GROVE LODGE					
2407 KENTUCKY ST		Telephone	(573) 754-5456	Alzheimer's Unit	No
	O 63353-2503	Level of Care:	SNF	Bed Capacity	90
Mailing Address 2407 KENTUCKY ST	0 0333 2303	County PIK		DMH Licensed	No
	O 63353-2503		Medicare/Medicaid	Facility Number	05002
	2000	Region 5	vicuicai e/ivicuicai u	Tuellity Tullioer	03002
MAPLE GROVE WELLNESS & REHAB	SILITATION				
560 CORISANDE HILLS RD		Telephone	(636) 343-2282	Alzheimer's Unit	No
FENTON MO	O 63026-5613	Level of Care:	SNF	<b>Bed Capacity</b>	144
Mailing Address 560 CORISANDE HILLS	RD	County JEF	FERSON	DMH Licensed	No
FENTON MO	O 63026-5613	Region 2	Medicare/Medicaid	Facility Number	01800
MAPLE LAWN NURSING HOME					
1410 WEST LINE ST		Telephone	(573) 769-2213	Alahaiman'a Thit	Yes
	O 63461-1831	•	SNF	Alzheimer's Unit	110
	0 03401-1831	Level of Care:	RION	Bed Capacity	
Mailing Address PO BOX 232 PALMYRA MO	O 63461-0232	0 0 00000		DMH Licensed	No
ralivita ivi	0 03401-0232	Region 5	Medicare/Medicaid	Facility Number	09961
MAPLE RIDGE RESIDENTIAL CARE C	CENTER LLC				
1034 DORIS DR		Telephone	(573) 760-0155	Alzheimer's Unit	No
FARMINGTON MO	O 63640-1954	Level of Care:	RCF*	Bed Capacity	20
Mailing Address PO BOX 272		County SAI	NT FRANCOIS	DMH Licensed	Yes
FARMINGTON MO	O 63640-0272	Region 2		Facility Number	19808
MAPLE SENIOR LIVING LLC					
3 SOUTHWEST FIRST LANE		Telephone	(417) 682-6184	Alzheimer's Unit	No
LAMAR MO	O 64759-8313	Level of Care:	RCF*	Bed Capacity	56
Mailing Address 3 SOUTHWEST FIRST LA	ANE	County BAI	RTON	DMH Licensed	No
LAMAR Mo	O 64759-8313	Region 1		Facility Number	20869
MAPLE TREE TERRACE - ASSISTED L	IVING BY AMEDICADE				
2510 CLINTON ST	AVING DI AMERICARE	Tolophone	(417) 358-7201	Alzheimer's Unit	No
	O 64836-3427	Telephone Level of Care:	(417) 338-7201 ALF**	Bed Capacity	50
	0 04830-3427				
Mailing Address 2510 CLINTON ST CARTHAGE Me	O 64836 3427	•	SPER	DMH Licensed	No
CANTRAGE	O 64836-3427	Region 1		Facility Number	17660
MAPLEBROOK-ASSISTED LIVING BY	AMERICARE				
520 MAPLE VALLEY DR		Telephone	(573) 756-2777	Alzheimer's Unit	Yes
520 MAPLE VALLEY DR FARMINGTON MO	O 63640-1981	Level of Care:	ALF**	<b>Bed Capacity</b>	61
520 MAPLE VALLEY DR FARMINGTON MO Mailing Address 520 MAPLE VALLEY DR	O 63640-1981	Level of Care:	` '		

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MAPLES HEALTH AND REHABILIT	TATION, THE			
610 WEST SUNSET ST		<b>Telephone</b> (417) 891-1700	Alzheimer's Unit	No
SPRINGFIELD	MO 65807-3696	Level of Care: SNF	Bed Capacity	120
Mailing Address 610 WEST SUNSET S	T	County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65807-3696	Region 1 Medicare/Medicaid	Facility Number	06441
MARI EWOOD INC				
MAPLEWOOD, INC 1827 CRADER DR		TO 1 1 (572) (25 0022	A1 1	NI-
	MO (5100 2005	<b>Telephone</b> (573) 635-0023	Alzheimer's Unit	No 24
JEFFERSON CITY	MO 65109-2005	Level of Care: ALF**	Bed Capacity	
Mailing Address 1827 CRADER DR	MO (5100 2005	County COLE	DMH Licensed	Yes
JEFFERSON CITY	MO 65109-2005	Region 6	Facility Number	16964
MAPLEWOOD, INC				
1827 CRADER DR		<b>Telephone</b> (573) 635-0023	Alzheimer's Unit	No
JEFFERSON CITY	MO 65109-2005	Level of Care: ALF	Bed Capacity	13
Mailing Address 1827 CRADER DR		County COLE	DMH Licensed	Yes
JEFFERSON CITY	MO 65109-2005	Region 6	Facility Number	16964
MARANATHA VILLAGE, INC				
233 EAST NORTON RD		<b>Telephone</b> (417) 833-0016	Alzheimer's Unit	No
SPRINGFIELD	MO 65803-3633	Level of Care: RCF	Bed Capacity	29
Mailing Address 233 EAST NORTON I	RD	County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65803-3633	Region 1	<b>Facility Number</b>	04907
MARANATHA VILLAGE, INC				
233 EAST NORTON RD		<b>Telephone</b> (417) 833-0016	Alzheimer's Unit	No
SPRINGFIELD	MO 65803-3633	Level of Care: SNF	Bed Capacity	120
Mailing Address 233 EAST NORTON F	RD	County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65803-3633	Region 1 Medicare/Medicaid	Facility Number	04907
		S		
MARI DE VILLA RETIREMENT CE	NTER. INC			
13900 CLAYTON RD	1,121,11	<b>Telephone</b> (636) 227-5347	Alzheimer's Unit	No
TOWN AND COUNTRY	MO 63017-8406	Level of Care: SNF	Bed Capacity	224
Mailing Address 13900 CLAYTON RD	3.20 0501, 0.100	County SAINT LOUIS COUNTY	DMH Licensed	No
TOWN AND COUNTRY	MO 63017-8406	Region 7	Facility Number	05047
TOWN THE COUNTY	110 03017 0100	Region /	Tuesting Tumber	03047
MARIAN CLIFF RESIDENTIAL CAR	DE CENTED I I C			
381 ELM ST	E CENTER LLC	Talanhana (572) 542 2219	Alzheimer's Unit	No
	MO 62672 0220	Telephone (573) 543-2218  Level of Care: RCF*		
SAINT MARY	MO 63673-9330		Bed Capacity	66
Mailing Address PO BOX 272	MO (2640 0272	County SAINTE GENEVIEVE	DMH Licensed	Yes
FARMINGTON	MO 63640-0272	Region 2	Facility Number	05058
MARIES MANOR		W 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	AT T	
174 BALLPARK RD	MO (5592 9042	<b>Telephone</b> (573) 422-3177	Alzheimer's Unit	No
VIENNA	MO 65582-8043	Level of Care: SNF	Bed Capacity	98 N
Mailing Address 174 BALLPARK RD	MO 65592 9042	County MARIES	DMH Licensed	No

Medicare/Medicaid

**Facility Number** 

10491

MO 65582-8043

**VIENNA** 

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MARK TWAIN ASSISTED LIVING				
901 UNION AVE		<b>Telephone</b> (660) 263-6515	Alzheimer's Unit	No
MOBERLY	MO 65270-2456	Level of Care: ALF**	Bed Capacity	42
Mailing Address 901 UNION AVE	1410 03270-2430	County RANDOLPH	DMH Licensed	No
MOBERLY	MO 65270-2456	·	Facility Number	16369
MODERLI	WO 03270-2430	Region 5	Facility Number	10309
MARK TWAIN NURSING				
11988 MARK TWAIN LN		<b>Telephone</b> (314) 291-8240	Alzheimer's Unit	No
BRIDGETON	MO 63044-2825	Level of Care: SNF	Bed Capacity	120
Mailing Address 11988 MARK TWAI		County SAINT LOUIS COUNTY	DMH Licensed	No
BRIDGETON	MO 63044-2825	Region 7 Medicare/Medicaid	Facility Number	08188
			٠	
MARSHFIELD CARE CENTER FO	R REHAB AND HEALTHCARE			
800 SOUTH WHITE OAK		<b>Telephone</b> (417) 859-3701	Alzheimer's Unit	No
MARSHFIELD	MO 65706-2231	Level of Care: SNF	Bed Capacity	74
Mailing Address 800 SOUTH WHITE	OAK	County WEBSTER	DMH Licensed	No
MARSHFIELD	MO 65706-2231	Region 1 Medicare/Medicaid	Facility Number	18481
MARSHFIELD PLACE				
820 SOUTH WHITE OAK STREET		<b>Telephone</b> (417) 859-6133	Alzheimer's Unit	No
MARSHFIELD	MO 65706-2231	Level of Care: RCF*	Bed Capacity	40
Mailing Address 820 SOUTH WHITE		County WEBSTER	DMH Licensed	Yes
MARSHFIELD	MO 65706-2231	Region 1	Facility Number	20500
MARY CULVER HOME, THE				
221 WEST WASHINGTON AVE		<b>Telephone</b> (314) 966-6034	Alzheimer's Unit	No
KIRKWOOD	MO 63122-3916	Level of Care: ICF	Bed Capacity	28
Mailing Address 221 W WASHINGTO	ON AVE	County SAINT LOUIS COUNTY	DMH Licensed	No
KIRKWOOD	MO 63122-3916	Region 7	Facility Number	00592
MARY, QUEEN AND MOTHER CE	NTER	<b>Telephone</b> (314) 961-8000	Alzheimer's Unit	No
SHREWSBURY	MO 63119-5001	Telephone (314) 961-8000 Level of Care: SNF		No 230
	WO 63119-3001		Bed Capacity DMH Licensed	
Mailing Address 7601 WATSON RD SHREWSBURY	MO 63119-5001	County SAINT LOUIS COUNTY  Region 7 Medicare/Medicaid	Facility Number	No 05103
SHREWSBORT	WIO 03117-3001	Region / Wiedical e/Medicald	racinty Number	03103
MARYMOUNT MANOR				
MARYMOUNT MANOR 313 AUGUSTINE RD		<b>Telephone</b> (636) 938-6770	Alzheimer's Unit	No
	MO 63025-1935	<b>Telephone</b> (636) 938-6770 <b>Level of Care:</b> RCF*	Alzheimer's Unit Bed Capacity	No 100
313 AUGUSTINE RD	MO 63025-1935	•		
313 AUGUSTINE RD EUREKA	MO 63025-1935 MO 63025-0600	Level of Care: RCF*	<b>Bed Capacity</b>	100
313 AUGUSTINE RD EUREKA <b>Mailing Address</b> PO BOX 600 EUREKA		Level of Care: RCF* County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed	100 Yes
313 AUGUSTINE RD EUREKA Mailing Address PO BOX 600 EUREKA MARYMOUNT MANOR		Level of Care: RCF* County SAINT LOUIS COUNTY Region 7	Bed Capacity DMH Licensed Facility Number	100 Yes 05117
313 AUGUSTINE RD EUREKA Mailing Address PO BOX 600 EUREKA MARYMOUNT MANOR 313 AUGUSTINE RD	MO 63025-0600	Level of Care: RCF* County SAINT LOUIS COUNTY Region 7  Telephone (636) 938-6770	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit	100 Yes 05117 Yes
313 AUGUSTINE RD EUREKA Mailing Address PO BOX 600 EUREKA  MARYMOUNT MANOR 313 AUGUSTINE RD EUREKA		Level of Care: RCF* County SAINT LOUIS COUNTY Region 7  Telephone (636) 938-6770 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	100 Yes 05117 Yes 174
313 AUGUSTINE RD EUREKA Mailing Address PO BOX 600 EUREKA MARYMOUNT MANOR 313 AUGUSTINE RD	MO 63025-0600	Level of Care: RCF* County SAINT LOUIS COUNTY Region 7  Telephone (636) 938-6770	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit	100 Yes 05117 Yes

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MARYVILLE CHATEAU 1101 E 5TH STREET	<b>Telephone</b> (660) 582-7447	A 1-1	NI-
MARYVILLE MO 64468-1955	Level of Care: RCF	Alzheimer's Unit Bed Capacity	No 20
Mailing Address 1101 E 5TH STREET	County NODAWAY	DMH Licensed	No
MARYVILLE MO 64468-1955	Region 4	Facility Number	05149
MAKI VILLE	Region +	racinty Number	03149
MARYVILLE LIVING CENTER			
524 NORTH LAURA	<b>Telephone</b> (660) 582-7447	Alzheimer's Unit	Yes
MARYVILLE MO 64468-1955	Level of Care: SNF	Bed Capacity	105
Mailing Address 524 NORTH LAURA	County NODAWAY	DMH Licensed	No
MARYVILLE MO 64468-1955	Region 4 Medicare/Medicaid	Facility Number	05149
MASON POINTE CARE CENTER	T. 1		
13190 SOUTH OUTER 40 RD	<b>Telephone</b> (314) 434-3300	Alzheimer's Unit	No
CHESTERFIELD MO 63017-5917	Level of Care: ALF**	Bed Capacity	62
Mailing Address 13190 SOUTH OUTER 40 RD	County SAINT LOUIS COUNTY	DMH Licensed	No
CHESTERFIELD MO 63017-5917	Region 7	Facility Number	03957
MASON POINTE CARE CENTER			
13190 SOUTH OUTER 40 RD	<b>Telephone</b> (314) 434-3330	Alzheimer's Unit	NO
CHESTERFIELD MO 63017-5917	Level of Care: SNF	Bed Capacity	200
Mailing Address 13190 SOUTH OUTER 40 RD	County SAINT LOUIS COUNTY	DMH Licensed	No
CHESTERFIELD MO 63017-5917	Region 7 Medicare/Medicaid	Facility Number	03957
		•	
MATTIS POINTE - ASSISTED LIVING BY AMERICARE			
MATTIS POINTE - ASSISTED LIVING BY AMERICARE 4962 MATTIS ROAD	<b>Telephone</b> (314) 328-4084	Alzheimer's Unit	Yes
	Telephone (314) 328-4084 Level of Care: ALF**	Alzheimer's Unit Bed Capacity	Yes 120
4962 MATTIS ROAD	• '		
4962 MATTIS ROAD SAINT LOUIS MO 63128-2795	Level of Care: ALF**	<b>Bed Capacity</b>	120
4962 MATTIS ROAD SAINT LOUIS MO 63128-2795  Mailing Address 4962 MATTIS ROAD SAINT LOUIS MO 63128-2795	Level of Care: ALF** County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed	120 No
4962 MATTIS ROAD SAINT LOUIS MO 63128-2795 Mailing Address 4962 MATTIS ROAD SAINT LOUIS MO 63128-2795 MAYWOOD MANOR	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7	Bed Capacity DMH Licensed Facility Number	120 No 30805
4962 MATTIS ROAD SAINT LOUIS MO 63128-2795 Mailing Address 4962 MATTIS ROAD SAINT LOUIS MO 63128-2795  MAYWOOD MANOR 1041 WEST TRUMAN RD	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (816) 254-6789	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	120 No 30805
4962 MATTIS ROAD SAINT LOUIS MO 63128-2795 Mailing Address 4962 MATTIS ROAD SAINT LOUIS MO 63128-2795  MAYWOOD MANOR 1041 WEST TRUMAN RD INDEPENDENCE MO 64050-3447	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (816) 254-6789 Level of Care: RCF*	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	120 No 30805
4962 MATTIS ROAD SAINT LOUIS MO 63128-2795 Mailing Address 4962 MATTIS ROAD SAINT LOUIS MO 63128-2795  MAYWOOD MANOR 1041 WEST TRUMAN RD	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (816) 254-6789	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	120 No 30805
4962 MATTIS ROAD SAINT LOUIS MO 63128-2795 Mailing Address 4962 MATTIS ROAD SAINT LOUIS MO 63128-2795  MAYWOOD MANOR 1041 WEST TRUMAN RD INDEPENDENCE MO 64050-3447 Mailing Address 1041 WEST TRUMAN RD	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (816) 254-6789 Level of Care: RCF* County JACKSON	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	120 No 30805 No 24 Yes
4962 MATTIS ROAD SAINT LOUIS MO 63128-2795 Mailing Address 4962 MATTIS ROAD SAINT LOUIS MO 63128-2795  MAYWOOD MANOR 1041 WEST TRUMAN RD INDEPENDENCE MO 64050-3447 Mailing Address 1041 WEST TRUMAN RD	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (816) 254-6789 Level of Care: RCF* County JACKSON	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	120 No 30805 No 24 Yes
4962 MATTIS ROAD SAINT LOUIS MO 63128-2795  Mailing Address 4962 MATTIS ROAD SAINT LOUIS MO 63128-2795  MAYWOOD MANOR 1041 WEST TRUMAN RD INDEPENDENCE MO 64050-3447  Mailing Address 1041 WEST TRUMAN RD INDEPENDENCE MO 64050-3447	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (816) 254-6789 Level of Care: RCF* County JACKSON	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	120 No 30805 No 24 Yes
4962 MATTIS ROAD SAINT LOUIS MO 63128-2795  Mailing Address 4962 MATTIS ROAD SAINT LOUIS MO 63128-2795  MAYWOOD MANOR 1041 WEST TRUMAN RD INDEPENDENCE MO 64050-3447  Mailing Address 1041 WEST TRUMAN RD INDEPENDENCE MO 64050-3447  MAYWOOD TERRACE LIVING CENTER	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (816) 254-6789 Level of Care: RCF* County JACKSON Region 3	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	120 No 30805 No 24 Yes 03948
4962 MATTIS ROAD SAINT LOUIS MO 63128-2795  Mailing Address 4962 MATTIS ROAD SAINT LOUIS MO 63128-2795  MAYWOOD MANOR 1041 WEST TRUMAN RD INDEPENDENCE MO 64050-3447  Mailing Address 1041 WEST TRUMAN RD INDEPENDENCE MO 64050-3447  MAYWOOD TERRACE LIVING CENTER 10300 EAST TRUMAN RD	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (816) 254-6789 Level of Care: RCF* County JACKSON Region 3  Telephone (816) 836-1250	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	120 No 30805 No 24 Yes 03948
4962 MATTIS ROAD SAINT LOUIS MO 63128-2795  Mailing Address 4962 MATTIS ROAD SAINT LOUIS MO 63128-2795  MAYWOOD MANOR 1041 WEST TRUMAN RD INDEPENDENCE MO 64050-3447  Mailing Address 1041 WEST TRUMAN RD INDEPENDENCE MO 64050-3447  MAYWOOD TERRACE LIVING CENTER 10300 EAST TRUMAN RD INDEPENDENCE MO 64052-2258	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (816) 254-6789 Level of Care: RCF* County JACKSON Region 3  Telephone (816) 836-1250 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	120 No 30805 No 24 Yes 03948
4962 MATTIS ROAD SAINT LOUIS MO 63128-2795  Mailing Address 4962 MATTIS ROAD SAINT LOUIS MO 63128-2795  MAYWOOD MANOR 1041 WEST TRUMAN RD INDEPENDENCE MO 64050-3447  Mailing Address 1041 WEST TRUMAN RD INDEPENDENCE MO 64050-3447  MAYWOOD TERRACE LIVING CENTER 10300 EAST TRUMAN RD INDEPENDENCE MO 64052-2258  Mailing Address 10300 EAST TRUMAN RD INDEPENDENCE MO 64052-2258  Mailing Address 10300 EAST TRUMAN RD INDEPENDENCE MO 64052-2258	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (816) 254-6789 Level of Care: RCF* County JACKSON Region 3  Telephone (816) 836-1250 Level of Care: SNF County JACKSON	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	120 No 30805 No 24 Yes 03948
4962 MATTIS ROAD SAINT LOUIS MO 63128-2795  Mailing Address 4962 MATTIS ROAD SAINT LOUIS MO 63128-2795  MAYWOOD MANOR 1041 WEST TRUMAN RD INDEPENDENCE MO 64050-3447  Mailing Address 1041 WEST TRUMAN RD INDEPENDENCE MO 64050-3447  MAYWOOD TERRACE LIVING CENTER 10300 EAST TRUMAN RD INDEPENDENCE MO 64052-2258  Mailing Address 10300 EAST TRUMAN RD INDEPENDENCE MO 64052-2258  Mailing Address 10300 EAST TRUMAN RD INDEPENDENCE MO 64052-2258  MCCLAY SENIOR CARE	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (816) 254-6789 Level of Care: RCF* County JACKSON Region 3  Telephone (816) 836-1250 Level of Care: SNF County JACKSON Region 3 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	120 No 30805 No 24 Yes 03948 Yes 89 No 08673
4962 MATTIS ROAD SAINT LOUIS MO 63128-2795  Mailing Address 4962 MATTIS ROAD SAINT LOUIS MO 63128-2795  MAYWOOD MANOR 1041 WEST TRUMAN RD INDEPENDENCE MO 64050-3447  Mailing Address 1041 WEST TRUMAN RD INDEPENDENCE MO 64050-3447  MAYWOOD TERRACE LIVING CENTER 10300 EAST TRUMAN RD INDEPENDENCE MO 64052-2258  Mailing Address 10300 EAST TRUMAN RD INDEPENDENCE MO 64052-2258  Mailing Address 10300 EAST TRUMAN RD INDEPENDENCE MO 64052-2258  MCCLAY SENIOR CARE 3801 MCCLAY ROAD	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (816) 254-6789 Level of Care: RCF* County JACKSON Region 3  Telephone (816) 836-1250 Level of Care: SNF County JACKSON Region 3 Medicare/Medicaid  Telephone (636) 244-3323	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	120 No 30805 No 24 Yes 03948 Yes 89 No 08673
4962 MATTIS ROAD SAINT LOUIS MO 63128-2795  Mailing Address 4962 MATTIS ROAD SAINT LOUIS MO 63128-2795  MAYWOOD MANOR 1041 WEST TRUMAN RD INDEPENDENCE MO 64050-3447  Mailing Address 1041 WEST TRUMAN RD INDEPENDENCE MO 64050-3447  MAYWOOD TERRACE LIVING CENTER 10300 EAST TRUMAN RD INDEPENDENCE MO 64052-2258  Mailing Address 10300 EAST TRUMAN RD INDEPENDENCE MO 64052-2258  Mailing Address 10300 EAST TRUMAN RD INDEPENDENCE MO 64052-2258  MCCLAY SENIOR CARE 3801 MCCLAY ROAD SAINT PETERS MO 63376-7327	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (816) 254-6789 Level of Care: RCF* County JACKSON Region 3  Telephone (816) 836-1250 Level of Care: SNF County JACKSON Region 3 Medicare/Medicaid  Telephone (636) 244-3323 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	120 No 30805 No 24 Yes 03948 Yes 89 No 08673
4962 MATTIS ROAD SAINT LOUIS MO 63128-2795  Mailing Address 4962 MATTIS ROAD SAINT LOUIS MO 63128-2795  MAYWOOD MANOR 1041 WEST TRUMAN RD INDEPENDENCE MO 64050-3447  Mailing Address 1041 WEST TRUMAN RD INDEPENDENCE MO 64050-3447  MAYWOOD TERRACE LIVING CENTER 10300 EAST TRUMAN RD INDEPENDENCE MO 64052-2258  Mailing Address 10300 EAST TRUMAN RD INDEPENDENCE MO 64052-2258  Mailing Address 10300 EAST TRUMAN RD INDEPENDENCE MO 64052-2258  MCCLAY SENIOR CARE 3801 MCCLAY ROAD	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (816) 254-6789 Level of Care: RCF* County JACKSON Region 3  Telephone (816) 836-1250 Level of Care: SNF County JACKSON Region 3 Medicare/Medicaid  Telephone (636) 244-3323	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	120 No 30805 No 24 Yes 03948 Yes 89 No 08673

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MCCRITE PLAZA AT BRIARCLIFI	F ASSISTED LIVING		
1201 NW TULLISON RD		<b>Telephone</b> (816) 888-7930	<b>Alzheimer's Unit</b> Yes
KANSAS CITY	MO 64116-2639	Level of Care: ALF**	Bed Capacity 164
Mailing Address 1201 NW TULLISON	N RD	County CLAY	<b>DMH Licensed</b> No
KANSAS CITY	MO 64116-2639	Region 4	Facility Number 29084
MCCRITE PLAZA AT BRIARCLIFI	E SZILLED EA CILLEV		
1301 TULLISON ROAD	SKILLED FACILITY	<b>Telephone</b> (816) 888-7930	Alzheimer's Unit No
KANSAS CITY	MO 64116-2640	Telephone (816) 888-7930 Level of Care: SNF	
			Bed Capacity 56  DMH Licensed No
Mailing Address 1201 NW TULLISON KANSAS CITY	MO 64116-2639		
KANSAS CII I	MO 04110-2039	Region 4 Medicare	Facility Number 29084
MCDONALD BOARDING HOME			
438 NORTH 17TH ST		<b>Telephone</b> (816) 233-7060	Alzheimer's Unit No
SAINT JOSEPH	MO 64501-2015	Level of Care: RCF	<b>Bed Capacity</b> 8
Mailing Address 438 NORTH 17TH ST	Γ	County BUCHANAN	DMH Licensed Yes
SAINT JOSEPH	MO 64501-2015	Region 4	Facility Number 05170
MCDONALD COUNTY LIVING CE	NTER		
1000 PATTERSON ST		<b>Telephone</b> (417) 845-3351	Alzheimer's Unit Yes
ANDERSON	MO 64831-7327	Level of Care: SNF	<b>Bed Capacity</b> 96
Mailing Address 1000 PATTERSON S	T	County MCDONALD	<b>DMH Licensed</b> No
ANDERSON	MO 64831-7327	Region 1 Medicare/Medicaid	Facility Number 05183
MCKNIGHT PLACE ASSISTED LIV	VING AND MEMORY CARE		
THREE MCKNIGHT PL		<b>Telephone</b> (314) 997-5333	Alzheimer's Unit No
SAINT LOUIS	MO 63124-1900	Level of Care: ALF**	<b>Bed Capacity</b> 120
Mailing Address THREE MCKNIGHT	PL	County SAINT LOUIS COUNTY	<b>DMH Licensed</b> No
SAINT LOUIS	MO 63124-1900	Region 7	Facility Number 23542
MCKNIGHT PLACE ASSISTED LIV	JINC AND MEMODY CADE		
THREE MCKNIGHT PLACE	ING AND MEMORI CARE	<b>Telephone</b> (314) 993-3333	Alzheimer's Unit Yes
SAINT LOUIS	MO 63124-1900	Level of Care: SNF	Bed Capacity 55
Mailing Address THREE MCKNIGHT		County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS	MO 63124-1900	Region 7	Facility Number 23542
		Region	255.2
MCKNIGHT PLACE EXTENDED C	ARE		
TWO MCKNIGHT PL		<b>Telephone</b> (314) 993-2221	Alzheimer's Unit No
SAINT LOUIS	MO 63124-1900	Level of Care: SNF	Bed Capacity 70
Mailing Address TWO MCKNIGHT Pl	L	County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS	MO 63124-1900	Region 7 Medicare	Facility Number 18914
MEADOW DIDGE SENIOD I WING			
MEADOW RIDGE LANE	r	Tolophono (550) 252 0550	Algheimen's Unit
521 MEADOW RIDGE LANE		<b>Telephone</b> (660) 263-0550	Alzheimer's Unit No
MOREDI V	MO 65270 4550	Loyal of Caro. ALE**	Red Conneity 57
MOBERLY Moiling Address 521 MEADOW PIDO	MO 65270-4550	Level of Care: ALF**	Bed Capacity 57
MOBERLY  Mailing Address 521 MEADOW RIDO  MOBERLY		Level of Care: ALF** County RANDOLPH Region 5	Bed Capacity 57  DMH Licensed No  Facility Number 28019

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MEADOW VIEW HEALTH & REHABI	LITATION		
2203 EAST MECHANIC ST		<b>Telephone</b> (816) 380-2622	Alzheimer's Unit Yes
HARRISONVILLE M	IO 64701-2060	Level of Care: SNF	<b>Bed Capacity</b> 120
Mailing Address 2203 EAST MECHANIC	ST	County CASS	DMH Licensed No
HARRISONVILLE M	1O 64701-2060	Region 3 Medicare/Medicaid	Facility Number 00968
MEADOWDDOOK DESIDENTIAL CAL	DE INC		
MEADOWBROOK RESIDENTIAL CAR 806 WEST MULBERRY	RE, INC	<b>Telephone</b> (573) 546-7065	Alzheimer's Unit No
	1O 63663-	Telephone (573) 546-7065 Level of Care: ALF**	
Mailing Address PO BOX 510	10 03003-		Bed Capacity 36  DMH Licensed No
S .	1O 63663-0510	County IRON Region 2	
FILOT KNOB	10 03003-0310	Region 2	Facility Number 20513
MEADOWVIEW MEMORY CARE			
555 WOODLAND VILLAS LANE		<b>Telephone</b> (636) 296-1400	Alzheimer's Unit Yes
	IO 63010-2011	Level of Care: ALF**	Bed Capacity 24
Mailing Address 1749 GILSINN LANE		County JEFFERSON	<b>DMH Licensed</b> No
FENTON N	IO 63026-2039	Region 2	Facility Number 12549
MEDICALODGES BUTLER			
103 EAST NURSERY		<b>Telephone</b> (660) 679-3179	Alzheimer's Unit Yes
BUTLER	IO 64730-2331	Level of Care: SNF	Bed Capacity 105
Mailing Address 103 EAST NURSERY		County BATES	DMH Licensed No
BUTLER M	1O 64730-2331	Region 3 Medicare/Medicaid	Facility Number 05319
MEDICALODGES NEOSHO			
400 LYON DR		<b>Telephone</b> (417) 451-2544	Alzheimer's Unit Yes
NEOSHO M	IO 64850-9194	Level of Care: SNF	Bed Capacity 114
Mailing Address 400 LYON DR		County NEWTON	DMH Licensed No
NEOSHO M	IO 64850-9194	Region 1 Medicare/Medicaid	Facility Number 05383
MEDICALODGES NEVADA			
1210 W ASHLAND ST		<b>Telephone</b> (417) 667-5064	Alzheimer's Unit No
	MO 64772-1906	Level of Care: SNF	Bed Capacity 100
Mailing Address 1210 W ASHLAND ST		County VERNON	DMH Licensed No
_	1O 64772-1906	Region 1 Medicare/Medicaid	Facility Number 05717
			•
MELODY HOUSE			
MELODY HOUSE		T. 1 . (572) 992 7229	11 1 1 TY 1/2 N
3031 SOUTH TEN MILE DR	AO (5100 (01)	<b>Telephone</b> (573) 893-7228	Alzheimer's Unit No
	IO 65109-6816	Level of Care: RCF*	Bed Capacity 15
Mailing Address 2013 WILLIAM STREET		County COLE	DMH Licensed Yes
JEFFERSON CITY M	MO 65109-4771	Region 6	Facility Number 14376
MEMORY LANE OF DEXTER		<b>T</b>	
415 S CATALPA STREET		<b>Telephone</b> (573) 624-7491	Alzheimer's Unit Yes
	O 63841-2017	Level of Care: SNF	Bed Capacity 73
Mailing Address 415 S CATALPA STREE	ET .	County STODDARD	<b>DMH Licensed</b> No
DEXTER M	IO 63841-2017	Region 2 Medicare/Medicaid	Facility Number 02156

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MERAMEC NURSING				
940 MATTOX DR		<b>Telephone</b> (573) 468-7733	Alzheimer's Unit	No
SULLIVAN	MO 63080-2364	Level of Care: SNF	Bed Capacity	60
Mailing Address 940 MATTOX DR		County CRAWFORD	DMH Licensed	No
SULLIVAN	MO 63080-2364	Region 6 Medicare/Medicaid	Facility Number	18277
MEYER CARE CENTER				
1201 WEST 19TH ST		<b>Telephone</b> (660) 584-7111	Alzheimer's Unit	No
HIGGINSVILLE	MO 64037-1458	Level of Care: SNF	Bed Capacity	56
Mailing Address 1201 WEST 19TH ST		County LAFAYETTE	DMH Licensed	No
HIGGINSVILLE	MO 64037-1458	Region 3 Medicare/Medicaid	Facility Number	05326
MEYER CARE CENTER		m		
1201 WEST 19TH ST	140 (4007 1450	<b>Telephone</b> (660) 584-7111	Alzheimer's Unit	No
HIGGINSVILLE	MO 64037-1458	Level of Care: ALF**	Bed Capacity	39
Mailing Address 1201 WEST 19TH ST		County LAFAYETTE	DMH Licensed	No
HIGGINSVILLE	MO 64037-1458	Region 3	Facility Number	05326
MILAN HEALTH CARE CENTER				
52435 INFIRMARY RD		<b>Telephone</b> (660) 265-4032	Alzheimer's Unit	No
MILAN	MO 63556-2874	Level of Care: SNF	Bed Capacity	100
Mailing Address 52435 INFIRMARY F	RD	County SULLIVAN	DMH Licensed	No
MILAN	MO 63556-2874	Region 5 Medicare/Medicaid	Facility Number	05418
MILL CREEK VIII LACK ACCIONED	A LIVING BY AMERICARE			
MILL CREEK VILLAGE-ASSISTED 1990 W SOUTHAMPTON DR	LIVING BY AMERICARE	<b>Telephone</b> (573) 381-2510	Alzheimer's Unit	Yes
COLUMBIA	MO 65203-6238	Telephone (573) 381-2510 Level of Care: ALF**	Bed Capacity	50
Mailing Address 1990 W SOUTHAMP		County BOONE	DMH Licensed	No
COLUMBIA	MO 65203-6238	Region 6	Facility Number	30107
COLUMBIA	WO 03203-0236	Region 0	racinty Number	30107
MILLER COUNTY CARE AND REH	IABILITATION CENTER			
1157 HIGHWAY 17		<b>Telephone</b> (573) 369-2318	Alzheimer's Unit	Yes
TUSCUMBIA	MO 65082-2100	Level of Care: SNF	Bed Capacity	86
Mailing Address 1157 HWY 17		County MILLER	DMH Licensed	No
TUSCUMBIA	MO 65082-2100	Region 6 Medicare/Medicaid	Facility Number	05422
MILLER RESIDENT CARE, INC				
210 ROCK RD		<b>Telephone</b> (660) 327-5680	Alzheimer's Unit	No
PARIS	MO 65275-1282	Level of Care: RCF*	Bed Capacity	40
Mailing Address 210 ROCK RD		County MONROE	DMH Licensed	No
PARIS	MO 65275-1282	Region 5	Facility Number	18026
MINGO RESIDENTIAL CARE FACI	LITY			
24080 STATE HWY 51		<b>Telephone</b> (573) 222-3086	Alzheimer's Unit	No
PUXICO	MO 63960-8114	Level of Care: RCF*	Bed Capacity	36
Mailing Address 24080 STATE HWY 5	51	County STODDARD	DMH Licensed	Yes

**Facility Number** 

24959

MO 63960-8114

PUXICO

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MISSION RIDGE				
4349 S KANSAS AVE		<b>Telephone</b> (417) 520-7020	Alzheimer's Unit	NO
SPRINGFIELD	MO 65810-1413	Level of Care: ALF**	Bed Capacity	60
Mailing Address 4349 S KANSAS AVE	3	County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65810-1413	Region 1	Facility Number	33342
MOCKINGBIRD MANOR RESIDENT	ΓIAL CARE			
227 W FRANKLIN	3.00 51050 4.514	<b>Telephone</b> (816) 781-8058	Alzheimer's Unit	No
LIBERTY	MO 64068-1641	Level of Care: RCF*	Bed Capacity	16
Mailing Address PO BOX 121		County CLAY	DMH Licensed	Yes
LIBERTY	MO 64069-0121	Region 4	Facility Number	05450
MONDOE CITY MANOD CADE CEN	NTED			
MONROE CITY MANOR CARE CEN 1010 HIGHWAY 24 & 36 EAST	NI LA	<b>Telephone</b> (573) 735-4850	Alzheimer's Unit	No
MONROE CITY	MO 63456-1116	Level of Care: SNF	Bed Capacity	60
Mailing Address 1010 HWY 24 & 36 E.			DMH Licensed	
· ·				No
MONROE CITY	MO 63456-1116	Region 5 Medicare/Medicaid	Facility Number	05473
MONROE MANOR				
200 SOUTH ST		<b>Telephone</b> (660) 327-4125	Alzheimer's Unit	Yes
PARIS	MO 65275-1165	Level of Care: SNF	Bed Capacity	119
Mailing Address 200 SOUTH ST		County MONROE	DMH Licensed	No
PARIS	MO 65275-1165	Region 5 Medicare/Medicaid	Facility Number	05484
			v	
MONTEREY PARK REHABILITATI	ON & HEALTH CARE CENTER			
4600 LITTLE BLUE PARKWAY		<b>Telephone</b> (816) 795-7888	Alzheimer's Unit	No
INDEPENDENCE	MO 64057-8302	Level of Care: SNF	Bed Capacity	122
Mailing Address 4600 LITTLE BLUE P	RKWY	County JACKSON	DMH Licensed	No
INDEPENDENCE	MO 64057-8302	Region 3 Medicare/Medicaid	Facility Number	15987
MONTICELLO HOUSE				
1115 K LAND DR		<b>Telephone</b> (573) 243-8989	Alzheimer's Unit	Yes
JACKSON	MO 63755-2588	Level of Care: SNF	Bed Capacity	105
	WO 03733-2388		DMH Licensed	No
Mailing Address PO BOX 740	MO 63755-0740	•		
JACKSON	MO 03733-0740	Region 2 Medicare/Medicaid	Facility Number	14454
MONTICELLO HOUSE				
1115 K LAND DR		<b>Telephone</b> (573) 243-8989	Alzheimer's Unit	No
JACKSON	MO 63755-2588	Level of Care: RCF*	Bed Capacity	32
Mailing Address PO BOX 740		County CAPE GIRARDEAU	DMH Licensed	No
JACKSON	MO 63755-0740	Region 2	Facility Number	14454
MOORE-FEW CARE CENTER				
901 SOUTH ADAMS		<b>Telephone</b> (417) 448-3841	Alzheimer's Unit	No
NEVADA	MO 64772-3209	Level of Care: SNF	Bed Capacity	108
Mailing Address 901 SOUTH ADAMS		County VERNON	DMH Licensed	No

Medicare/Medicaid

**Facility Number** 

05703

MO 64772-3209

NEVADA

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MOOREVIEW RESIDENTIAL				
130 WEST CULTON		<b>Telephone</b> (660) 429-1587	Alzheimer's Unit No	О
WARRENSBURG	MO 64093-1720	Level of Care: RCF	Bed Capacity 20	
Mailing Address 130 WEST CULTON		County JOHNSON	<b>DMH Licensed</b> Ye	S
WARRENSBURG	MO 64093-1720	Region 3	Facility Number 11225	5
MORNINGSIDE CENTER				
1700 MORNINGSIDE DR		<b>Telephone</b> (660) 646-0170	Alzheimer's Unit No	
CHILLICOTHE	MO 64601-1545	Level of Care: SNF	Bed Capacity 6	
Mailing Address 1700 MORNINGSIDI		County LIVINGSTON	DMH Licensed No.	
CHILLICOTHE	MO 64601-1545	Region 4 Medicare/Medicaid	Facility Number 0555	7
MORNINGSIDE CENTER ASSISTE	D I IVING ADADTMENTS			
1702 MORNINGSIDE DR	DEIVING AFARTMENTS	<b>Telephone</b> (660) 646-0170	Alzheimer's Unit No	0
CHILLICOTHE	MO 64601-1545	Level of Care: ALF	Bed Capacity 3	
Mailing Address 1702 MORNINGSIDI		County LIVINGSTON	DMH Licensed No.	
CHILLICOTHE	MO 64601-1545	Region 4	Facility Number 0555	
CHILLICOTTE	1110 04001 1343	Kegion +	racinty (value)	,
MOTHER OF GOOD COUNSEL HO	)ME			
6825 NATURAL BRIDGE RD		<b>Telephone</b> (314) 383-4765	Alzheimer's Unit No	О
SAINT LOUIS	MO 63121-5314	Level of Care: SNF	Bed Capacity 114	4
Mailing Address 6825 NATURAL BRI	IDGE RD	County SAINT LOUIS COUNTY	DMH Licensed No	o
SAINT LOUIS	MO 63121-5314	Region 7	Facility Number 05568	8
MOTHER OF PERPETUAL HELP R	RESIDENCE, INC			
7609 WATSON ROAD		<b>Telephone</b> (314) 918-2260	Alzheimer's Unit Ye	s
SAINT LOUIS	MO 63119-5001	Level of Care: ALF**	Bed Capacity 160	0
Mailing Address 7609 WATSON ROA	D	County SAINT LOUIS COUNTY	DMH Licensed No	o
SAINT LOUIS	MO 63119-5001	Region 7	Facility Number 2111	1
MOUNT CARMEL SENIOR LIVING	G - ST CHARLES, LLC	T. 1. 1. (626) 046 4140		
723 FIRST CAPITOL DR	MO (2201 2500	<b>Telephone</b> (636) 946-4140	Alzheimer's Unit No	
SAINT CHARLES	MO 63301-2729	Level of Care: SNF	Bed Capacity 110	
Mailing Address 723 FIRST CAPITOL		County SAINT CHARLES	DMH Licensed No	
SAINT CHARLES	MO 63301-2729	Region 5 Medicare/Medicaid	Facility Number 07560	U
MOUNTAIN VIEW HEALTHCARE				
1211 NORTH ASH ST		<b>Telephone</b> (417) 934-6818	Alzheimer's Unit No	О
MOUNTAIN VIEW	MO 65548-7376	Level of Care: SNF	Bed Capacity 103	5
Mailing Address PO BOX 879		County HOWELL	DMH Licensed No	О
MOUNTAIN VIEW	MO 65548-0879	Region 2 Medicare/Medicaid	Facility Number 15542	2
MT VERNON NURSING		T-l (417) 455 2250	Alabadan and Till to	•
1425 SOUTH LANDRUM	MO 65712 1012	Telephone (417) 466-2260	Alzheimer's Unit NC	
MT VERNON Mailing Address 1425 S. LANDRUM	MO 65712-1912	Level of Care: SNF	Bed Capacity 60	
Mailing Address 1425 S LANDRUM	MO (5712 1012	County LAWRENCE	DMH Licensed No.	
MT VERNON	MO 65712-1912	Region 1 Medicare/Medicaid	Facility Number 16304	4

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MY BLESSED HOME				
305 E 63RD ST		<b>Telephone</b> (816) 678-8061	Alzheimer's Unit	No
KANSAS CITY	MO 64113-2225	Level of Care: RCF	Bed Capacity	11
Mailing Address 305 E 63RD ST		County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64113-2225	Region 3	Facility Number	27175
MY PLACE RESIDENTIAL CARE,	L.C.			
23 NORTH SIXTH ST		<b>Telephone</b> (636) 933-1793	Alzheimer's Unit	No
FESTUS	MO 63028-1301	Level of Care: ALF	Bed Capacity	44
Mailing Address 23 NORTH SIXTH S	Γ	County JEFFERSON	DMH Licensed	Yes
FESTUS	MO 63028-1301	Region 2	Facility Number	10631
MY DY A CE TOO DYG				
MY PLACE TOO, INC		T. 1. 1 (626) 596 7971	A11	N
1107 CLARKE ST	MO (2020 2700	<b>Telephone</b> (636) 586-7871	Alzheimer's Unit	No 50
DE SOTO	MO 63020-2709	Level of Care: RCF*	Bed Capacity	50 V
Mailing Address 1107 CLARKE ST	MO (2020 2700	County JEFFERSON	DMH Licensed	Yes
DE SOTO	MO 63020-2709	Region 2	Facility Number	16234
MYERS NURSING & CONVALESC	ENT CENTER			
2315 WALROND AVE		<b>Telephone</b> (816) 231-3180	Alzheimer's Unit	No
KANSAS CITY	MO 64127-4210	Level of Care: ICF	<b>Bed Capacity</b>	84
Mailing Address 2315 WALROND AV	νΈ	County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64127-4210	Region 3 Medicaid	Facility Number	05626
NATHAN DICHADD HEAI TH CAD	E CENTED			
NATHAN RICHARD HEALTH CAR	E CENTER	Telephone (417) 667-8889	Alzhaimar's Unit	No
700 EAST HIGHLAND AVE		Telephone (417) 667-8889	Alzheimer's Unit	No 68
700 EAST HIGHLAND AVE NEVADA	MO 64772-1025	Level of Care: SNF	<b>Bed Capacity</b>	68
700 EAST HIGHLAND AVE NEVADA <b>Mailing Address</b> 700 EAST HIGHLAN	MO 64772-1025 ID AVE	Level of Care: SNF County VERNON	Bed Capacity DMH Licensed	68 No
700 EAST HIGHLAND AVE NEVADA	MO 64772-1025	Level of Care: SNF	<b>Bed Capacity</b>	68
700 EAST HIGHLAND AVE NEVADA <b>Mailing Address</b> 700 EAST HIGHLAN	MO 64772-1025 ID AVE	Level of Care: SNF County VERNON	Bed Capacity DMH Licensed	68 No
700 EAST HIGHLAND AVE NEVADA Mailing Address 700 EAST HIGHLAN NEVADA NAZARETH LIVING CENTER	MO 64772-1025 ID AVE	Level of Care: SNF County VERNON	Bed Capacity DMH Licensed	68 No
700 EAST HIGHLAND AVE NEVADA <b>Mailing Address</b> 700 EAST HIGHLAN NEVADA	MO 64772-1025 ID AVE	Level of Care: SNF County VERNON Region 1 Medicare/Medicaid  Telephone (314) 487-3950	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit	68 No
700 EAST HIGHLAND AVE NEVADA Mailing Address 700 EAST HIGHLAN NEVADA  NAZARETH LIVING CENTER 2 NAZARETH LN SAINT LOUIS	MO 64772-1025 ID AVE	Level of Care: SNF County VERNON Region 1 Medicare/Medicaid  Telephone (314) 487-3950 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	68 No 18210 Yes 114
700 EAST HIGHLAND AVE NEVADA Mailing Address 700 EAST HIGHLAN NEVADA  NAZARETH LIVING CENTER 2 NAZARETH LN SAINT LOUIS Mailing Address 2 NAZARETH LN	MO 64772-1025 ID AVE MO 64772-1025	Level of Care: SNF County VERNON Region 1 Medicare/Medicaid  Telephone (314) 487-3950	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	68 No 18210 Yes
700 EAST HIGHLAND AVE NEVADA Mailing Address 700 EAST HIGHLAN NEVADA  NAZARETH LIVING CENTER 2 NAZARETH LN SAINT LOUIS	MO 64772-1025 ID AVE MO 64772-1025	Level of Care: SNF County VERNON Region 1 Medicare/Medicaid  Telephone (314) 487-3950 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	68 No 18210 Yes 114
700 EAST HIGHLAND AVE NEVADA Mailing Address 700 EAST HIGHLAN NEVADA  NAZARETH LIVING CENTER 2 NAZARETH LN SAINT LOUIS Mailing Address 2 NAZARETH LN	MO 64772-1025 ID AVE MO 64772-1025 MO 63129-7600	Level of Care: SNF County VERNON Region 1 Medicare/Medicaid  Telephone (314) 487-3950 Level of Care: ALF** County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	68 No 18210 Yes 114 No
700 EAST HIGHLAND AVE NEVADA Mailing Address 700 EAST HIGHLAN NEVADA  NAZARETH LIVING CENTER 2 NAZARETH LN SAINT LOUIS Mailing Address 2 NAZARETH LN SAINT LOUIS	MO 64772-1025 ID AVE MO 64772-1025 MO 63129-7600	Level of Care: SNF County VERNON Region 1 Medicare/Medicaid  Telephone (314) 487-3950 Level of Care: ALF** County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	68 No 18210 Yes 114 No
700 EAST HIGHLAND AVE NEVADA Mailing Address 700 EAST HIGHLAN NEVADA  NAZARETH LIVING CENTER 2 NAZARETH LN SAINT LOUIS Mailing Address 2 NAZARETH LN SAINT LOUIS NAZARETH LIVING CENTER	MO 64772-1025 ID AVE MO 64772-1025 MO 63129-7600	Level of Care: SNF County VERNON Region 1 Medicare/Medicaid  Telephone (314) 487-3950 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	68 No 18210 Yes 114 No 17458
700 EAST HIGHLAND AVE NEVADA Mailing Address 700 EAST HIGHLAN NEVADA  NAZARETH LIVING CENTER 2 NAZARETH LN SAINT LOUIS Mailing Address 2 NAZARETH LN SAINT LOUIS	MO 64772-1025 ID AVE MO 64772-1025 MO 63129-7600	Level of Care: SNF County VERNON Region 1 Medicare/Medicaid  Telephone (314) 487-3950 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (314) 487-3950	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	68 No 18210 Yes 114 No
700 EAST HIGHLAND AVE NEVADA Mailing Address 700 EAST HIGHLAN NEVADA  NAZARETH LIVING CENTER 2 NAZARETH LN SAINT LOUIS Mailing Address 2 NAZARETH LN SAINT LOUIS  NAZARETH LIVING CENTER 2 NAZARETH LIVING CENTER 2 NAZARETH LIVING CENTER	MO 64772-1025 ID AVE MO 64772-1025 MO 63129-7600 MO 63129-7600	Level of Care: SNF County VERNON Region 1 Medicare/Medicaid  Telephone (314) 487-3950 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (314) 487-3950 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	68 No 18210 Yes 114 No 17458
700 EAST HIGHLAND AVE NEVADA  Mailing Address 700 EAST HIGHLAN NEVADA  NAZARETH LIVING CENTER 2 NAZARETH LN SAINT LOUIS Mailing Address 2 NAZARETH LN SAINT LOUIS  NAZARETH LIVING CENTER 2 NAZARETH LIVING CENTER 2 NAZARETH LN SAINT LOUIS	MO 64772-1025 ID AVE MO 64772-1025 MO 63129-7600 MO 63129-7600	Level of Care: SNF County VERNON Region 1 Medicare/Medicaid  Telephone (314) 487-3950 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (314) 487-3950 Level of Care: SNF County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	68 No 18210 Yes 114 No 17458
700 EAST HIGHLAND AVE NEVADA Mailing Address 700 EAST HIGHLAN NEVADA  NAZARETH LIVING CENTER 2 NAZARETH LN SAINT LOUIS Mailing Address 2 NAZARETH LN SAINT LOUIS  NAZARETH LIVING CENTER 2 NAZARETH LN SAINT LOUIS MAILING CENTER 2 NAZARETH LN SAINT LOUIS Mailing Address 2 NAZARETH LN	MO 64772-1025 ID AVE MO 64772-1025 MO 63129-7600 MO 63129-7600	Level of Care: SNF County VERNON Region 1 Medicare/Medicaid  Telephone (314) 487-3950 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (314) 487-3950 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	68 No 18210 Yes 114 No 17458
700 EAST HIGHLAND AVE NEVADA  Mailing Address 700 EAST HIGHLAN NEVADA  NAZARETH LIVING CENTER 2 NAZARETH LN SAINT LOUIS  Mailing Address 2 NAZARETH LN SAINT LOUIS  NAZARETH LIVING CENTER 2 NAZARETH LN SAINT LOUIS  Mailing Address 2 NAZARETH LN SAINT LOUIS	MO 64772-1025 ID AVE MO 64772-1025  MO 63129-7600  MO 63129-7600  MO 63129-7600  MO 63129-7600	Level of Care: SNF County VERNON Region 1 Medicare/Medicaid  Telephone (314) 487-3950 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (314) 487-3950 Level of Care: SNF County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	68 No 18210 Yes 114 No 17458
700 EAST HIGHLAND AVE NEVADA  Mailing Address 700 EAST HIGHLAN NEVADA  NAZARETH LIVING CENTER 2 NAZARETH LN SAINT LOUIS  Mailing Address 2 NAZARETH LN SAINT LOUIS  NAZARETH LIVING CENTER 2 NAZARETH LN SAINT LOUIS  Mailing Address 2 NAZARETH LN SAINT LOUIS  Mailing Address 2 NAZARETH LN SAINT LOUIS  Mailing Address 2 NAZARETH LN SAINT LOUIS	MO 64772-1025 ID AVE MO 64772-1025  MO 63129-7600  MO 63129-7600  MO 63129-7600  MO 63129-7600	Level of Care: SNF County VERNON Region 1 Medicare/Medicaid  Telephone (314) 487-3950 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (314) 487-3950 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	68 No 18210 Yes 114 No 17458 No 121 No 17458
700 EAST HIGHLAND AVE NEVADA Mailing Address 700 EAST HIGHLAN NEVADA  NAZARETH LIVING CENTER 2 NAZARETH LN SAINT LOUIS Mailing Address 2 NAZARETH LN SAINT LOUIS  NAZARETH LIVING CENTER 2 NAZARETH LN SAINT LOUIS Mailing Address 2 NAZARETH LN SAINT LOUIS Mailing Address 2 NAZARETH LN SAINT LOUIS Mailing Address 2 NAZARETH LN SAINT LOUIS NEIGHBORHOODS AT QUAIL CRI 1514 WEST LARK	MO 64772-1025 ID AVE MO 64772-1025  MO 63129-7600  MO 63129-7600  MO 63129-7600  MO 63129-7600  EEK, THE	Level of Care: SNF County VERNON Region 1 Medicare/Medicaid  Telephone (314) 487-3950 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (314) 487-3950 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (417) 889-1275	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	68 No 18210 Yes 114 No 17458 No 121 No 17458
700 EAST HIGHLAND AVE NEVADA Mailing Address 700 EAST HIGHLAN NEVADA  NAZARETH LIVING CENTER 2 NAZARETH LN SAINT LOUIS Mailing Address 2 NAZARETH LN SAINT LOUIS  NAZARETH LIVING CENTER 2 NAZARETH LN SAINT LOUIS Mailing Address 2 NAZARETH LN SAINT LOUIS Mailing Address 2 NAZARETH LN SAINT LOUIS NEIGHBORHOODS AT QUAIL CR 1514 WEST LARK SPRINGFIELD	MO 64772-1025 ID AVE MO 64772-1025  MO 63129-7600  MO 63129-7600  MO 63129-7600  MO 63129-7600	Level of Care: SNF County VERNON Region 1 Medicare/Medicaid  Telephone (314) 487-3950 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (314) 487-3950 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (417) 889-1275 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	68 No 18210 Yes 114 No 17458 No 121 No 17458
700 EAST HIGHLAND AVE NEVADA Mailing Address 700 EAST HIGHLAN NEVADA  NAZARETH LIVING CENTER 2 NAZARETH LN SAINT LOUIS Mailing Address 2 NAZARETH LN SAINT LOUIS  NAZARETH LIVING CENTER 2 NAZARETH LN SAINT LOUIS Mailing Address 2 NAZARETH LN SAINT LOUIS Mailing Address 2 NAZARETH LN SAINT LOUIS Mailing Address 2 NAZARETH LN SAINT LOUIS NEIGHBORHOODS AT QUAIL CRI 1514 WEST LARK	MO 64772-1025 ID AVE MO 64772-1025  MO 63129-7600  MO 63129-7600  MO 63129-7600  MO 63129-7600  EEK, THE	Level of Care: SNF County VERNON Region 1 Medicare/Medicaid  Telephone (314) 487-3950 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (314) 487-3950 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (417) 889-1275	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	68 No 18210 Yes 114 No 17458 No 121 No 17458

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NEIGHBORHOODS REHABILITAT	TION & SKILLED NURSING BY TIGE	ERPLACE. THE	
3003 FALLING LEAF COURT		<b>Telephone</b> (573) 256-4620	Alzheimer's Unit No
COLUMBIA	MO 65201-3549	Level of Care: SNF	Bed Capacity 120
Mailing Address 3003 FALLING LEAR		County BOONE	DMH Licensed No
COLUMBIA	MO 65201-3549	Region 6 Medicare/Medicaid	Facility Number 24341
COLUMBIA	WO 03201-3349	kegion • Medicare/Medicaid	racinty Number 24341
NEW HAVEN CARE CENTER			
9503 HIGHWAY 100		<b>Telephone</b> (573) 237-2103	Alzheimer's Unit No
NEW HAVEN	MO 63068-1300	Level of Care: SNF	<b>Bed Capacity</b> 90
Mailing Address 9503 HWY 100		County FRANKLIN	DMH Licensed No
NEW HAVEN	MO 63068-1300	Region 6 Medicare/Medicaid	Facility Number 05738
NEW HAVEN CARE CENTER			
9503 HIGHWAY 100		<b>Telephone</b> (573) 237-2103	Alzheimer's Unit No
NEW HAVEN	MO 63068-1300	Level of Care: ALF	Bed Capacity 16
Mailing Address 9503 HWY 100		County FRANKLIN	DMH Licensed No
NEW HAVEN	MO 63068-1300	Region 6	Facility Number 05738
NEW HOPE ASSISTED LIVING LLO	С		
328 NORTH NEW HOPE DRIVE		<b>Telephone</b> (573) 300-4877	Alzheimer's Unit No
POPLAR BLUFF	MO 63901-4819	Level of Care: ALF	Bed Capacity 15
Mailing Address 328 NORTH NEW HO	OPE DR	County BUTLER	DMH Licensed No
POPLAR BLUFF	MO 63901-4819	Region 2	Facility Number 32690
NEW HORIZONS RCF II			
5858 BUSIEK ROAD		<b>Telephone</b> (573) 756-2426	Alzheimer's Unit No
FARMINGTON	MO 63640-7325	Level of Care: ALF	<b>Bed Capacity</b> 15
Mailing Address PO BOX 510		County SAINT FRANCOIS	<b>DMH Licensed</b> Yes
FARMINGTON	MO 63640-0510	Region 2	Facility Number 14868
NEW MADRID LIVING CENTER			
1050 DAWSON RD		<b>Telephone</b> (573) 748-5622	Alzheimer's Unit Yes
NEW MADRID	MO 63869-1116	Level of Care: SNF	Bed Capacity 112
Mailing Address 1050 DAWSON RD		County NEW MADRID	DMH Licensed No
NEW MADRID	MO 63869-1116	Region 2 Medicare/Medicaid	Facility Number 04952
NEW MARK REHAB AND HEALTH	ICARE CENTER		
11221 NORTH NASHUA DR		<b>Telephone</b> (816) 734-4433	Alzheimer's Unit Yes
KANSAS CITY	MO 64155-1159	Level of Care: SNF	Bed Capacity 199
Mailing Address 11221 N NASHUA D		County CLAY	DMH Licensed No
KANSAS CITY	MO 64155-1159	Region 4 Medicare/Medicaid	Facility Number 12688
11.01.00 011 1	01100 1107	region i macuical chatenicalu	2 nemej 1 minori 12000
NEW PERSPECTIVE – WELDON SI	PRING	Talanhana (626) 220-1211	Alghoimon's Unit
400 SIEDENTOP ROAD	MO (2204 1026	<b>Telephone</b> (636) 229-1311	Alzheimer's Unit YES
WELDON SPRING	MO 63304-1036	Level of Care: ALF	Bed Capacity 112
Mailing Address 400 SIEDENTOP RO		County ST CHARLES	DMH Licensed No
WELDON SPRING	MO 63304-1036	Region	Facility Number 33581

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NEWBRIDGE RETIREMENT COM	MUNITY			
1205 S. MOUNT AUBURN RD		<b>Telephone</b> (573) 803-1863	Alzheimer's Unit	Yes
CAPE GIRARDEAU	MO 63703-6581	Level of Care: ALF**	Bed Capacity	94
Mailing Address 1205 S. MOUNT AU		County CAPE GIRARDEAU	DMH Licensed	No
CAPE GIRARDEAU	MO 63703-6581	Region 2	Facility Number	33246
CAI E GINANDEAU	MO 03703-0301	Kegion 2	racinty Number	33240
NEWSTEAD PLACE				
19 NORTH NEWSTEAD		<b>Telephone</b> (314) 286-4510	Alzheimer's Unit	No
SAINT LOUIS	MO 63108-2260	Level of Care: RCF*	Bed Capacity	20
Mailing Address 19 N NEWSTEAD		County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS	MO 63108-2260	Region 7	<b>Facility Number</b>	19169
NHC HEALTHCARE, DESLOGE				
801 BRIM ST		<b>Telephone</b> (573) 431-0223	Alzheimer's Unit	Yes
DESLOGE	MO 63601-3441	Level of Care: SNF	Bed Capacity	120
Mailing Address PO BOX AA		County SAINT FRANCOIS	DMH Licensed	No
DESLOGE	MO 63601-0568	Region 2 Medicare/Medicaid	Facility Number	02143
DESECOL	140 03001 0300	Region 2 Medical e/Medicalu	Tacinty Number	02143
NHC HEALTHCARE, JOPLIN				
2700 EAST 34TH ST		<b>Telephone</b> (417) 781-1737	Alzheimer's Unit	No
JOPLIN	MO 64804-4310	Level of Care: SNF	Bed Capacity	126
Mailing Address 2700 EAST 34TH ST		County NEWTON	DMH Licensed	No
JOPLIN	MO 64803-2877	Region 1 Medicare/Medicaid	Facility Number	04044
NHC HEALTHCARE, KENNETT				
1120 FALCON		<b>Telephone</b> (573) 888-1150	Alzheimer's Unit	Yes
KENNETT	MO 63857-3825	Level of Care: SNF	Bed Capacity	170
Mailing Address PO BOX 696	110 05007 5025	County DUNKLIN	DMH Licensed	No
KENNETT	MO 63857-0696	Region 2 Medicare/Medicaid	Facility Number	04268
KENNETT	140 03037-0070	Region 2 Medical e/Medicald	Pacinty Number	04206
NHC HEALTHCARE, MARYLAND	HEIGHTS			
2920 FEE FEE RD		<b>Telephone</b> (314) 291-0121	Alzheimer's Unit	Yes
MARYLAND HEIGHTS	MO 63043-1915	Level of Care: SNF	Bed Capacity	220
Mailing Address 2920 FEE FEE RD		County SAINT LOUIS COUNTY	DMH Licensed	No
MARYLAND HEIGHTS	MO 63043-1915	Region 7 Medicare/Medicaid	Facility Number	08272
NHC HEALTHCARE, ST CHARLES	<b>S</b>			
35 SUGAR MAPLE LN	-	<b>Telephone</b> (636) 946-8887	Alzheimer's Unit	No
SAINT CHARLES	MO 63303-5740	Level of Care: SNF	Bed Capacity	120
Mailing Address 35 SUGAR MAPLE I		County SAINT CHARLES	DMH Licensed	No
•	MO 63303-5740			
SAINT CHARLES	1910 05505-5740	Region 5 Medicare/Medicaid	Facility Number	07503
NHC HEALTHCARE, WEST PLAIN	TS .			
211 DAVIS DR		<b>Telephone</b> (417) 256-0798	Alzheimer's Unit	Yes
WEST PLAINS	MO 65775-2242	Level of Care: SNF	<b>Bed Capacity</b>	114
Mailing Address PO BOX 497		County HOWELL	DMH Licensed	No
WEST PLAINS	MO 65775-0497	Region 2 Medicare/Medicaid	Facility Number	08434

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NHC PLACE, ST PETERS MEMOR				
5300 EXECUTIVE CENTER PARKWA		<b>Telephone</b> (636) 477-6955	Alzheimer's Unit	Yes
SAINT PETERS	MO 63376-3182	Level of Care: ALF**	Bed Capacity	60
Mailing Address 5300 EXECUTIVE C		County SAINT CHARLES	DMH Licensed	No
SAINT PETERS	MO 63376-3182	Region 5	Facility Number	29889
NICK'S HEALTH CARE CENTER,	LLC			
253 EAST HIGHWAY 116		<b>Telephone</b> (816) 539-2376	Alzheimer's Unit	No
PLATTSBURG	MO 64477-1561	Level of Care: SNF	Bed Capacity	70
Mailing Address 253 EAST HWY 116		County CLINTON	DMH Licensed	No
PLATTSBURG	MO 64477-1561	Region 4 Medicare/Medicaid	Facility Number	22058
NIXA NURSING & REHAB				
1104 NORTH MAIN ST		<b>Telephone</b> (417) 725-1777	Alzheimer's Unit	No
NIXA	MO 65714-9316	Level of Care: SNF	Bed Capacity	82
Mailing Address 1104 N MAIN ST	MO 03/14-9310	County CHRISTIAN	DMH Licensed	No
NIXA	MO 65714-9316	Region 1 Medicare/Medicaid	Facility Number	13840
NIAA	MO 03/14-9310	Region 1 Medicare/Medicaid	racinty Number	13640
NODAWAY HEALTHCARE				
22371 STATE HIGHWAY 46		<b>Telephone</b> (660) 562-2876	Alzheimer's Unit	No
MARYVILLE	MO 64468-8157	Level of Care: SNF	Bed Capacity	60
Mailing Address PO BOX 307		County NODAWAY	DMH Licensed	No
MARYVILLE	MO 64468-0307	Region 4 Medicare/Medicaid	Facility Number	05766
NORMANDY NURSING CENTER				
7301 SAINT CHARLES ROCK RD		<b>Telephone</b> (314) 862-0555	Alzheimer's Unit	No
SAINT LOUIS	MO 63133-1737	Level of Care: SNF	<b>Bed Capacity</b>	116
Mailing Address 7301 SAINT CHARL	ES ROCK RD	County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63133-1737	Region 7 Medicare/Medicaid	Facility Number	01118
NORTERRE				
2555 NORTERRE CIRCLE		<b>Telephone</b> (816) 479-4793	Alzheimer's Unit	No
LIBERTY	MO 64068-3313	Level of Care: SNF	<b>Bed Capacity</b>	60
Mailing Address 2555 NORTERRE C	IRCLE	County CLAY	DMH Licensed	No
LIBERTY	MO 64086-3313	Region 4 Medicare/Medicaid	Facility Number	31005
NORTERRE				
2580 NORTERRE CIRCLE		<b>Telephone</b> (816) 479-4793	Alzheimer's Unit	Yes
LIBERTY	MO 64068-3412	Level of Care: ALF**	Bed Capacity	60
Mailing Address 2580 NORTERRE C	IRCLE	County CLAY	DMH Licensed	No
LIBERTY	MO 64068-3412	Region 4	Facility Number	31005
NORTH VILLAGE PARK				
2041 SILVA LN		<b>Telephone</b> (660) 269-7300	Alzheimer's Unit	No
MOBERLY	MO 65270-3658	Level of Care: SNF	Bed Capacity	184
Mailing Address 2041 SILVA LN		County RANDOLPH	DMH Licensed	No
MOBERLY	MO 65270-3658	Region 5 Medicare/Medicaid	Facility Number	06481
		=		

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NORTHLAND REHABILITATION & H	EALTH CARE CENTER		
4301 NE PARVIN ROAD		<b>Telephone</b> (816) 702-8000	Alzheimer's Unit No
KANSAS CITY M	4O 64117-3001	Level of Care: SNF	Bed Capacity 118
Mailing Address 4301 NE PARVIN ROAL	)	County CLAY	DMH Licensed No
KANSAS CITY M	4O 64117-3001	Region 4 Medicare/Medicaid	Facility Number 31230
NORTHPARK VILLAGE - ASSISTED I	IVING BY AMERICARE		
4449 N STATE HIGHWAY NN	AVING DI AMERICARE	<b>Telephone</b> (417) 581-3200	Alzheimer's Unit No
	4O 65721-7221	Level of Care: ALF**	Bed Capacity 52
Mailing Address 4449 N STATE HIGHWA		County CHRISTIAN	DMH Licensed No
0	40 65721-7221	Region 1	Facility Number 20003
OZAKK IV	10 03721-7221	Kegion 1	racinty Number 20005
NORTHRIDGE PLACE - ASSISTED LI	VING BY AMERICARE	T. 1 (417) 500 0700	A11
1500 LYNN ST		<b>Telephone</b> (417) 532-9793	Alzheimer's Unit Yes
	1O 65536-4409	Level of Care: ALF**	Bed Capacity 50
Mailing Address 1500 LYNN ST		County LACLEDE	DMH Licensed No
LEBANON M	1O 65536-4409	Region 1	Facility Number 20525
NORTHWOOD HILLS CARE CENTER			
800 NORTH ARTHUR ST		<b>Telephone</b> (417) 754-2208	Alzheimer's Unit Yes
	4O 65674-8655	Level of Care: SNF	Bed Capacity 120
Mailing Address PO BOX 187		County POLK	<b>DMH Licensed</b> No
HUMANSVILLE N	4O 65674-0187	Region 1 Medicare/Medicaid	Facility Number 10607
OAK KNOLL SKILLED NURSING & R	EHABILITATION CENTER		
37 N CLARK AVE		<b>Telephone</b> (314) 521-7419	Alzheimer's Unit No
	4O 63135-2323	Level of Care: SNF	<b>Bed Capacity</b> 72
Mailing Address 37 N CLARK AVE		County SAINT LOUIS COUNTY	<b>DMH Licensed</b> No
FERGUSON M	4O 63135-2323	Region 7 Medicare/Medicaid	Facility Number 05864
OAK PARK CARE CENTER			
6637 BERTHOLD AVE		<b>Telephone</b> (314) 781-3444	Alzheimer's Unit No
	4O 63139-3318	Level of Care: SNF	Bed Capacity 120
Mailing Address 6637 BERTHOLD AVE		County SAINT LOUIS CITY	<b>DMH Licensed</b> No
SAINT LOUIS N	MO 63139-3318	Region 7 Medicare/Medicaid	Facility Number 05914
OAK POINTE OF CARTHAGE			
300 W AIRPORT DR		<b>Telephone</b> (417) 358-3355	Alzheimer's Unit Yes
CARTHAGE M	4O 64836-3511	Level of Care: ALF**	<b>Bed Capacity</b> 55
Mailing Address 300 W AIRPORT DR		County JASPER	DMH Licensed No
CARTHAGE N	MO 64836-3511	Region 1	Facility Number 30168
OAK POINTE OF KEARNEY			
200 MEADOWBROOK DR		<b>Telephone</b> (816) 628-0075	Alzheimer's Unit Yes
	1O 64060-8788	Level of Care: ALF**	Bed Capacity 55
Mailing Address 200 MEADOWBROOK		County CLAY	DMH Licensed No
KEARNEY M	1O 64060-8788	Region 4	Facility Number 29803

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OAK POINTE OF MARYVILLE			
817 SOUTH COUNTRY CLUB DR	<b>Telephone</b> (660) 562-2799	Alzheimer's Unit	Yes
MARYVILLE MO 64468-1477	Level of Care: ALF**	<b>Bed Capacity</b>	55
Mailing Address 817 SOUTH COUNTRY CLUB DR	County NODAWAY	DMH Licensed	No
MARYVILLE MO 64468-1477	Region 4	Facility Number	29544
OAK POINTE OF MONETT			
1011 OLD AIRPORT ROAD	<b>Telephone</b> (417) 235-3500	Alzheimer's Unit	Yes
MONETT MO 65708-1375	Level of Care: ALF**	Bed Capacity	55
Mailing Address 1011 OLD AIRPORT ROAD	County LAWRENCE	DMH Licensed	No
MONETT MO 65708-1375	Region 1	Facility Number	30206
OAK POINTE OF NEOSHO			
2601 OAK RIDGE EXTENSION	<b>Telephone</b> (417) 451-8872	Alzheimer's Unit	Yes
NEOSHO MO 64850-7765	Level of Care: ALF**	Bed Capacity	55
Mailing Address 2601 OAK RIDGE EXTENSION	County NEWTON	DMH Licensed	No
NEOSHO MO 64850-7765	Region 1	Facility Number	29972
1.12 3.000 // 0.000	Region 1	Tuesticy Trustice	2,7,12
OAK POINTE OF ROLLA			
1000 EAST LIONS CLUB DRIVE	<b>Telephone</b> (573) 426-2186	Alzheimer's Unit	Yes
ROLLA MO 65401-4356	Level of Care: ALF**	<b>Bed Capacity</b>	65
Mailing Address 1000 EAST LIONS CLUB DRIVE	County PHELPS	DMH Licensed	No
ROLLA MO 65401-4356	Region 6	Facility Number	31216
OAK BOINTE OF WARRENTON			
OAK POINTE OF WARRENTON	Tolonhono (626) 456 6464	Alahaiman'a Tinit	Vac
700 FORREST AVE WARRENTON MO 63383-7040	<b>Telephone</b> (636) 456-6464 <b>Level of Care:</b> ALF**	Alzheimer's Unit	Yes 71
Mailing Address 700 FORREST AVE	County WARREN	Bed Capacity DMH Licensed	No
WARRENTON MO 63383-7040	Region 6	Facility Number	25045
WARRENTON MO 03363-7040	Region 0	Facility Number	23043
OAK POINTE OF WASHINGTON			
1650 HIGH STREET	<b>Telephone</b> (636) 390-3290	Alzheimer's Unit	Yes
WASHINGTON MO 63090-4354	Level of Care: ALF**	<b>Bed Capacity</b>	65
Mailing Address 1650 HIGH STREET	County FRANKLIN	DMH Licensed	No
WASHINGTON MO 63090-4354	Region 6	Facility Number	32114
OAV DIDGE ACCICTED I WING			
OAK RIDGE ASSISTED LIVING	m 1 1 (01c) 77c 2425		37
403 CRISPIN ST	<b>Telephone</b> (816) 776-3435	Alzheimer's Unit	Yes
RICHMOND MO 64085-1212	Level of Care: ALF**	Bed Capacity	55 No.
Mailing Address 403 CRISPIN ST	County RAY	DMH Licensed	No
RICHMOND MO 64085-1212	Region 4	Facility Number	29711
OAKDALE CARE CENTER			
2702 DEBBIE LN	<b>Telephone</b> (573) 686-5242	Alzheimer's Unit	No
POPLAR BLUFF MO 63901-2650	Level of Care: SNF	<b>Bed Capacity</b>	70
Mailing Address 2702 DEBBIE LN	County BUTLER	DMH Licensed	No
POPLAR BLUFF MO 63901-2650	Region 2 Medicare/Medicaid	<b>Facility Number</b>	18157

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OAKDALE CARE CENTER			
2702 DEBBIE LN		<b>Telephone</b> (573) 686-5242	Alzheimer's Unit No
POPLAR BLUFF	MO 63901-2650	Level of Care: ALF	<b>Bed Capacity</b> 60
Mailing Address 2702 DEBBIE LN		County BUTLER	DMH Licensed No
POPLAR BLUFF	MO 63901-2650	Region 2	Facility Number 18157
OAKDALE CARE CENTER			
2702 DEBBIE LN		<b>Telephone</b> (573) 686-5242	Alzheimer's Unit No
POPLAR BLUFF	MO 63901-2650	Level of Care: RCF*	<b>Bed Capacity</b> 36
Mailing Address 2702 DEBBIE LN		County BUTLER	DMH Licensed Yes
POPLAR BLUFF	MO 63901-2650	Region 2	Facility Number 18157
OAKRIDGE OF PLATTSBURG			
205 EAST CLAY AVE		<b>Telephone</b> (816) 539-2128	Alzheimer's Unit No
PLATTSBURG	MO 64477-8100	Level of Care: SNF	<b>Bed Capacity</b> 60
Mailing Address PO BOX 247		County CLINTON	DMH Licensed No
PLATTSBURG	MO 64477-0247	Region 4 Medicare/Medicaid	Facility Number 05994
OAKS COTTAGE ASSISTED LIVIN	G, THE		
5448 N 2ND AVENUE		<b>Telephone</b> (417) 581-0330	Alzheimer's Unit Yes
OZARK	MO 65721-6210	Level of Care: ALF**	Bed Capacity 12
Mailing Address 5448 N 2ND AVENU	E	County CHRISTIAN	DMH Licensed No
OZARK	MO 65721-6210	Region 1	Facility Number 31804
OAKS RETIREMENT COMMUNITY	Y,THE		
127 HAMLET ROAD		<b>Telephone</b> (417) 239-1112	Alzheimer's Unit No
BRANSON	MO 65616-7746	Level of Care: ALF**	Bed Capacity 30
Mailing Address 127 HAMLET ROAD	•	County TANEY	DMH Licensed No
BRANSON	MO 65616-7746	Region 1	Facility Number 27358
OAKS, THE			
5550 NOLAND ROAD		<b>Telephone</b> (816) 356-0200	Alzheimer's Unit No
KANSAS CITY	MO 64133-3685	Level of Care: RCF	<b>Bed Capacity</b> 62
Mailing Address 5550 NOLAND RD		County JACKSON	DMH Licensed Yes
KANSAS CITY	MO 64133-3685	Region 3	Facility Number 13440
		-	
OASIS RESIDENTIAL CARE FACIL	ITY		
3508 PRAIRIE AVE		<b>Telephone</b> (314) 534-3355	Alzheimer's Unit No
SAINT LOUIS	MO 63107-2214	Level of Care: RCF*	Bed Capacity 20
Mailing Address 3508 PRAIRIE AVE		County SAINT LOUIS CITY	DMH Licensed Yes
SAINT LOUIS	MO 63107-2214	Region 7	Facility Number 15415
	- 3310, 221.	angion ,	
OREGON HEALTHCARE			
501 MONROE		<b>Telephone</b> (660) 446-3355	Alzheimer's Unit No
OREGON		- · · · · · · · · · · · · · · · · · · ·	
OKEGON	MO 64473-7800	Level of Care: SNF	Bed Capacity 60
	MO 64473-7800		
Mailing Address PO BOX 19 OREGON	MO 64473-7800 MO 64473-0019		

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ORILLA'S WAY					
1209 SOUTH HIGH ST		Telephone	(660) 564-2204	Alzheimer's Unit	No
	64456-0056	Level of Care:	ALF**	Bed Capacity	37
Mailing Address PO BOX 56		•	RTH	DMH Licensed	No
GRANT CITY MO	64456-0056	Region 4		Facility Number	08591
OCA CIE DE A CIU DEMA DIN MEATIVON A NID	THE A LOW CA DE CENTED				
OSAGE BEACH REHABILITATION AND 844 PASSOVER RD	HEALTH CARE CENTER	T-1	(573) 348-2225	A 1-1:!- T7:4	No
	65065-2834	Telephone Level of Care:	SNF	Alzheimer's Unit	94
Mailing Address 844 PASSOVER RD	03003-2834		MDEN	Bed Capacity DMH Licensed	No
	65065-2834			Facility Number	06116
OSAGE BEACH MO	03003-2634	Region 0 h	Medicare/Medicaid	racinty Number	00110
OUR LADY OF MERCY COUNTRY HOM	Œ				
2160 MERCY DRIVE		Telephone	(816) 781-5711	Alzheimer's Unit	No
	64068-7955	Level of Care:	ALF**	Bed Capacity	44
Mailing Address 2115 MATURANA DRIVE		County CLA	ΑY	DMH Licensed	No
•	64068-7955	Region 4		Facility Number	06153
		8		•	******
OWEN ACRES RESIDENTIAL CARE FAC	CILITY				
614 COUNTY ROAD 466		Telephone	(573) 778-0497	Alzheimer's Unit	No
POPLAR BLUFF MO	63901-2964	Level of Care:	RCF	<b>Bed Capacity</b>	20
Mailing Address 614 COUNTY RD 466		County BUT	ΓLER	DMH Licensed	Yes
POPLAR BLUFF MO	63901-2964	Region 2		Facility Number	21093
OXFORD GRAND AT SHOAL CREEK		m. 1. 1.	(016) 701 0000		37
8280 N TULLIS AVENUE	C4150 FC02	Telephone	(816) 781-8282	Alzheimer's Unit	Yes
	64158-7683	Level of Care:	ALF**	Bed Capacity	98 N
Mailing Address 8280 N TULLIS AVENUE	(4150 7602	County CLA	AY	DMH Licensed	No
KANSAS CITY MO	64158-7683	Region 4		Facility Number	30758
OZARK MANOR					
1013 HIGHWAY Z		Telephone	(573) 783-8338	Alzheimer's Unit	No
EDEDEDICITED IN 140			* *		
FREDERICKTOWN MO	63645-8035	Level of Care:	ALF**	Bed Capacity	55
	63645-8035		ALF** DISON	Bed Capacity DMH Licensed	55 No
Mailing Address 1013 HIGHWAY Z	63645-8035 63645-8035	County MA		Bed Capacity  DMH Licensed  Facility Number	
Mailing Address 1013 HIGHWAY Z				DMH Licensed	No
Mailing Address 1013 HIGHWAY Z		County MA		DMH Licensed	No
Mailing Address 1013 HIGHWAY Z FREDERICKTOWN MO		County MA		DMH Licensed	No
Mailing Address 1013 HIGHWAY Z FREDERICKTOWN MO  OZARK NURSING & CARE CENTER 1486 NORTH RIVERSIDE RD		County MA Region 2	DISON	DMH Licensed Facility Number	No 22947
Mailing Address 1013 HIGHWAY Z FREDERICKTOWN MO  OZARK NURSING & CARE CENTER 1486 NORTH RIVERSIDE RD	63645-8035 65721-7688	County MA Region 2  Telephone Level of Care:	DISON (417) 581-7126	DMH Licensed Facility Number	No 22947 No
Mailing Address 1013 HIGHWAY Z FREDERICKTOWN MO  OZARK NURSING & CARE CENTER 1486 NORTH RIVERSIDE RD OZARK MO  Mailing Address 1486 NORTH RIVERSIDE	63645-8035 65721-7688	County MA Region 2  Telephone Level of Care: County CHI	DISON (417) 581-7126 SNF	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	No 22947 No 93
Mailing Address 1013 HIGHWAY Z FREDERICKTOWN MO  OZARK NURSING & CARE CENTER 1486 NORTH RIVERSIDE RD OZARK MO Mailing Address 1486 NORTH RIVERSIDE OZARK MO	63645-8035 65721-7688 RD 65721-7688	County MA Region 2  Telephone Level of Care: County CHI	DISON  (417) 581-7126  SNF RISTIAN	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	No 22947 No 93 No
Mailing Address 1013 HIGHWAY Z FREDERICKTOWN MO  OZARK NURSING & CARE CENTER 1486 NORTH RIVERSIDE RD OZARK MO Mailing Address 1486 NORTH RIVERSIDE OZARK MO  OZARK MO	63645-8035 65721-7688 RD 65721-7688	County MA Region 2  Telephone Level of Care: County CHI Region 1 M	DISON  (417) 581-7126  SNF RISTIAN  Medicare/Medicaid	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 22947 No 93 No 06240
Mailing Address 1013 HIGHWAY Z FREDERICKTOWN MO  OZARK NURSING & CARE CENTER 1486 NORTH RIVERSIDE RD OZARK MO Mailing Address 1486 NORTH RIVERSIDE OZARK MO  OZARK MO  OZARK OAKS RESIDENTIAL CARE FACT	63645-8035 65721-7688 RD 65721-7688	County 2  Region 2  Telephone Level of Care: County CHI Region 1 M	(417) 581-7126 SNF RISTIAN Medicare/Medicaid	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 22947 No 93 No 06240
Mailing Address 1013 HIGHWAY Z FREDERICKTOWN MO  OZARK NURSING & CARE CENTER 1486 NORTH RIVERSIDE RD OZARK MO Mailing Address 1486 NORTH RIVERSIDE OZARK MO  OZARK MO  OZARK OAKS RESIDENTIAL CARE FACT 3405 S SCHIFFERDECKER JOPLIN MO	63645-8035 65721-7688 RD 65721-7688	County MA Region 2  Telephone Level of Care: County CHI Region 1 M  Telephone Level of Care:	(417) 581-7126 SNF RISTIAN Medicare/Medicaid (417) 347-7760 RCF*	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	No 22947 No 93 No 06240
Mailing Address 1013 HIGHWAY Z FREDERICKTOWN MO  OZARK NURSING & CARE CENTER 1486 NORTH RIVERSIDE RD OZARK MO Mailing Address 1486 NORTH RIVERSIDE OZARK MO  OZARK OAKS RESIDENTIAL CARE FACT 3405 S SCHIFFERDECKER JOPLIN MO Mailing Address PO BOX 2526	63645-8035 65721-7688 RD 65721-7688	County MA Region 2  Telephone Level of Care: County CHI Region 1 M  Telephone Level of Care:	(417) 581-7126 SNF RISTIAN Medicare/Medicaid	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 22947 No 93 No 06240

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OZARK REHABILITATION & HEA	LTH CARE CENTER		
1083 OZARK CARE DR		<b>Telephone</b> (573) 348-1711	Alzheimer's Unit No
OSAGE BEACH	MO 65065-3016	Level of Care: SNF	<b>Bed Capacity</b> 60
Mailing Address PO BOX 270		County CAMDEN	DMH Licensed No
OSAGE BEACH	MO 65065-0270	Region 6 Medicare/Medicaid	Facility Number 06217
OZARK RIVERVIEW MANOR			
1200 WEST HALL ST		<b>Telephone</b> (417) 581-6025	Alzheimer's Unit No
OZARK	MO 65721-9103	Level of Care: SNF	Bed Capacity 90
Mailing Address PO BOX 157	110 03721 7103	County CHRISTIAN	DMH Licensed No
OZARK	MO 65721-0157	Region 1 Medicare/Medicaid	Facility Number 01426
OZAKK	WIO 03721-0137	Region 1 Medicare/Medicaid	racinty Number 01420
OZARKS METHODIST MANOR, TH	ır.		
205 SOUTH COLLEGE	***	<b>Telephone</b> (417) 258-2573	Alzheimer's Unit No
MARIONVILLE	MO 65705-9340	Level of Care: RCF	Bed Capacity 76
Mailing Address PO BOX 403	WIO 03703-7340	County LAWRENCE	DMH Licensed No
MARIONVILLE	MO 65705-0403	Region 1	Facility Number 06273
WARIONVILLE	WO 03703-0403	Region 1	racinty Number 00275
OZARKS METHODIST MANOR, TH	HE.		
205 SOUTH COLLEGE		<b>Telephone</b> (417) 258-2573	Alzheimer's Unit Yes
MARIONVILLE	MO 65705-9340	Level of Care: SNF	Bed Capacity 78
Mailing Address PO BOX 403	110 03703 7340	County LAWRENCE	DMH Licensed No
MARIONVILLE	MO 65705-0403	Region 1 Medicare/Medicaid	Facility Number 06273
WARIONVILLE	WO 03703-0403	Region 1 Medicare/Medicaid	Facility Number 00273
PACIFIC CARE CENTER			
105 SOUTH SIXTH ST		<b>Telephone</b> (636) 271-4222	Alzheimer's Unit No
PACIFIC	MO 63069-1328	Level of Care: ALF**	Bed Capacity 16
Mailing Address 105 S SIXTH ST		County FRANKLIN	DMH Licensed No
PACIFIC	MO 63069-1328	Region 6	Facility Number 12638
Then te	110 0300) 1320	Region 0	ruenty rumber 12030
PACIFIC CARE CENTER			
105 SOUTH SIXTH ST		<b>Telephone</b> (636) 271-4222	Alzheimer's Unit No
PACIFIC	MO 63069-1328	Level of Care: SNF	Bed Capacity 120
Mailing Address 105 S SIXTH ST		County FRANKLIN	DMH Licensed No
PACIFIC	MO 63069-1328	Region 6 Medicare/Medicaid	Facility Number 12638
PARC PROVENCE			
605 COEUR DE VILLE DR		<b>Telephone</b> (314) 542-2500	Alzheimer's Unit Yes
SAINT LOUIS	MO 63141-6603	Level of Care: SNF	<b>Bed Capacity</b> 140
Mailing Address 605 COEUR DE VILI	LE DR	County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS	MO 63141-6603	Region 7	Facility Number 24122
PARK PLACE APARTMENTS			
1211 NORTH ASH ST		<b>Telephone</b> (417) 934-6818	Alzheimer's Unit No
MOUNTAIN VIEW	MO 65548-7376	Level of Care: ALF	Bed Capacity 18
Mailing Address PO BOX 879		County HOWELL	DMH Licensed No

**Facility Number** 

15542

MO 65548-0879

MOUNTAIN VIEW

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PARK PLACE II					
2000 BOARDWALK PLACE DR		Telephone	(636) 625-2900	Alzheimer's Unit	No
O'FALLON MO	63368-3901	Level of Care:	ALF**	Bed Capacity	124
Mailing Address 2000 BOARDWALK PLACE	E DR	•	INT CHARLES	DMH Licensed	No
O'FALLON MO	63368-3901	Region 5		Facility Number	29016
	** *** *** *** *** *** *** *** *** ***				
PARKDALE MANOR HEALTH & REHAB 814 WEST SOUTH AVE	ILITATION	T-1	(660) 502 0161	Alzheimer's Unit	No
	64469 2772	Telephone	(660) 582-8161		NO 86
	64468-2772	Level of Care:	SNF	Bed Capacity	
Mailing Address 814 WEST SOUTH AVE	64468-2772		DAWAY	DMH Licensed	No
MARYVILLE MO	04408-2772	Region 4	Medicare/Medicaid	Facility Number	06308
PARKSIDE MANOR					
1201 HUNT AVE		Telephone	(573) 449-1448	Alzheimer's Unit	Yes
COLUMBIA MO	65202-1367	Level of Care:	SNF	Bed Capacity	120
Mailing Address 1201 HUNT AVE		County BO	ONE	DMH Licensed	No
COLUMBIA MO	65202-1367	Region 6	Medicare/Medicaid	Facility Number	11262
PARKSIDE MANOR, LLC					
300 S SAINT CHARLES ST		Telephone	(573) 324-9918	Alzheimer's Unit	No
	63334-2221	Level of Care:	ALF**	Bed Capacity	48
Mailing Address 300 S SAINT CHARLES ST		County PIK	Œ	DMH Licensed	No
BOWLING GREEN MO	63334-2221	Region 5		Facility Number	05511
PARKSIDE-ASSISTED LIVING BY AMER	ICARE				
2100 PARKSIDE AVE		Telephone	(573) 308-0834	Alzheimer's Unit	NO
	65401-5472	Level of Care:	ALF**	Bed Capacity	28
Mailing Address 2100 PARKSIDE AVE			ELPS	DMH Licensed	No
•	65401-5472	Region 6		Facility Number	31191
PARKVIEW HEALTH CARE FACILITY					
119 WEST FOREST		Telephone	(417) 326-3000	Alzheimer's Unit	Yes
	65613-1316	Level of Care:	SNF	Bed Capacity	78
Mailing Address 119 WEST FOREST		County PO		DMH Licensed	No
BOLIVAR MO	65613-1316	Region 1	Medicare/Medicaid	Facility Number	17638
PARKVIEW HEALTHCARE					
128 NORTH HARDESTY		Telephone	(816) 241-2020	Alzheimer's Unit	No
KANSAS CITY MO	64123-1404	Level of Care:	SNF	Bed Capacity	120
Mailing Address 128 NORTH HARDESTY		County JAC	CKSON	DMH Licensed	No
•	64123-1404	Region 3	Medicare/Medicaid	Facility Number	02928
PARKWAY HEALTH CARE CENTER					
2323 SWOPE PARKWAY		Telephone	(816) 924-1122	Alzheimer's Unit	No
	64130-2638	Level of Care:	SNF	Bed Capacity	97
Mailing Address 2323 SWOPE PARKWAY	0.150 2050		CKSON	DMH Licensed	No
The state of the s		Jouney JAC		Divili Diceised	110

Medicare/Medicaid

**Facility Number** 

07092

MO 64130-2638

KANSAS CITY

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PARKWAY SENIOR LIVING, THE				
550 NE NAPOLEON DR		<b>Telephone</b> (816) 228-8866	Alzheimer's Unit	Yes
BLUE SPRINGS	MO 64014-5403	Level of Care: ALF**	Bed Capacity	72
Mailing Address 550 NE NAPOLEON		County JACKSON	DMH Licensed	No
BLUE SPRINGS	MO 64014-5403	Region 3	Facility Number	29917
PARKWOOD MEADOWS - ASSISTE	ED LIVING BY AMERICARE			
805 PARKWOOD DR		<b>Telephone</b> (573) 883-3883	Alzheimer's Unit	Yes
SAINTE GENEVIEVE	MO 63670-1858	Level of Care: ALF**	Bed Capacity	66
Mailing Address 805 PARKWOOD DR		County SAINTE GENEVIEVE	DMH Licensed	No
SAINTE GENEVIEVE	MO 63670-1858	Region 2	Facility Number	23234
PARKWOOD SKILLED NURSING A	NIN DELIADII ITATIONI CENTED			
3201 PARKWOOD LN	AND REHABILITATION CENTER	<b>Telephone</b> (314) 291-5911	Alzheimer's Unit	No
MARYLAND HEIGHTS	MO 63043-1334	Level of Care: SNF	Bed Capacity	130
Mailing Address 3201 PARKWOOD L		County SAINT LOUIS COUNTY	DMH Licensed	No
MARYLAND HEIGHTS	MO 63043-1334	Region 7 Medicare/Medicaid	Facility Number	02471
WINTERIND HEIGHTS	110 03043 1334	Region / Medicale/Medicald	racinty (valider	02471
PEACE HAVEN ASSOCIATION				
12630 ROTT RD		<b>Telephone</b> (314) 965-3833	Alzheimer's Unit	No
SAINT LOUIS	MO 63127-1214	Level of Care: ICF	Bed Capacity	42
Mailing Address 12630 ROTT RD		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63127-1214	Region 7	Facility Number	06369
		S	•	
PEARL'S II EDEN FOR ELDERS				
611 NORTH COLLEGE		<b>Telephone</b> (660) 748-4407	Alzheimer's Unit	No
PRINCETON	MO 64673-1051	Level of Care: SNF	Bed Capacity	60
Mailing Address 611 NORTH COLLEG	GE	County MERCER	DMH Licensed	No
PRINCETON	MO 64673-1051	Region 4 Medicare/Medicaid	<b>Facility Number</b>	06453
PETTIS COUNTY ASSISTED LIVIN	G, LLC			
3017 BROOKING PARK AVENUE	150	<b>Telephone</b> (660) 827-3222	Alzheimer's Unit	No
SEDALIA	MO 65301-9327	Level of Care: ALF**	Bed Capacity	139
Mailing Address 3017 BROOKING PA		County PETTIS	DMH Licensed	Yes
SEDALIA	MO 65301-9327	Region 6	Facility Number	30112
PILLARS OF NORTH COUNTY HE	ALTH & REHABILITATION CENTE	R. THE		
13700 OLD HALLS FERRY RD		<b>Telephone</b> (314) 355-0760	Alzheimer's Unit	No
FLORISSANT	MO 63033-4109	Level of Care: SNF	Bed Capacity	120
Mailing Address 13700 OLD HALLS F		County SAINT LOUIS COUNTY	DMH Licensed	No
FLORISSANT	MO 63033-4109	Region 7 Medicare/Medicaid	Facility Number	07440
	3 30000 1107	intential Ciriculatu	_ *************************************	0,440
PIN OAKS LIVING CENTER				
1525 WEST MONROE ST		<b>Telephone</b> (573) 581-7261	Alzheimer's Unit	No
MEXICO	MO 65265-1201	Level of Care: SNF	Bed Capacity	124
Mailing Address 1525 WEST MONRO	E ST	County AUDRAIN	DMH Licensed	No
MEXICO	MO 65265-1201	Region 5 Medicare/Medicaid	Facility Number	05804

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PINE LODGE RESIDENTIAL CARE		T. I. I. (417) 245 0210	
967 N MAPLE ST	MO (5(22) 75(2)	<b>Telephone</b> (417) 345-0310	Alzheimer's Unit No
BUFFALO	MO 65622-7568	Level of Care: RCF	Bed Capacity 22
Mailing Address 967 N MAPLE ST	MO (5(2) 75(9	County DALLAS	DMH Licensed No
BUFFALO	MO 65622-7568	Region 1	Facility Number 25563
PINE VALLEY AT THE WOODLANI	os		
620 WOODLAND MEADOWS		<b>Telephone</b> (636) 202-1050	Alzheimer's Unit No
ARNOLD	MO 63010-2030	Level of Care: ALF**	Bed Capacity 48
Mailing Address 620 WOODLAND ME		County JEFFERSON	DMH Licensed No
ARNOLD	MO 63010-2030	Region 2	Facility Number 31974
		5	·
PINE VALLEY RCF			
3381 1st STREET		<b>Telephone</b> (573) 760-8601	Alzheimer's Unit No
DOE RUN	MO 63637-3155	Level of Care: RCF	<b>Bed Capacity</b> 12
Mailing Address 3381 1st STREET		County SAINT FRANCOIS	<b>DMH Licensed</b> Yes
DOE RUN	MO 63637-3155	Region 2	Facility Number 08379
PINE VIEW MANOR, INC			
307 NORTH PINEVIEW ST		<b>Telephone</b> (660) 783-2118	Alzheimer's Unit No
STANBERRY	MO 64489-1509	Level of Care: SNF	Bed Capacity 70
Mailing Address 307 NORTH PINEVIE		County GENTRY	DMH Licensed No
STANBERRY	MO 64489-1509	Region 4 Medicare/Medicaid	Facility Number 05832
		g	
PINE VIEW MANOR, INC			
307 NORTH PINEVIEW ST		<b>Telephone</b> (660) 783-2118	Alzheimer's Unit No
STANBERRY	MO 64489-1509	Level of Care: ALF**	<b>Bed Capacity</b> 12
Mailing Address 307 NORTH PINEVIE		County GENTRY	<b>DMH Licensed</b> No
STANBERRY	MO 64489-1509	Region 4	Facility Number 05832
PIONEER SKILLED NURSING CENT	ΓΕΚ		
1500 SOUTH KANSAS AVE		<b>Telephone</b> (660) 376-2001	Alzheimer's Unit No
MARCELINE	MO 64658-1716	Level of Care: SNF	<b>Bed Capacity</b> 96
Mailing Address 1500 S KANSAS AVE		County CHARITON	DMH Licensed No
MARCELINE	MO 64658-1716	Region 5 Medicare/Medicaid	Facility Number 05900
DI AZA AT WII DWOOD CENIOD I I	VINC THE		
PLAZA AT WILDWOOD SENIOR LI	VING, I HE	Tolonhono (626) 272 2000	Alzheimer's Unit Yes
251 PLAZA DRIVE WILDWOOD	MO 62040 1202	<b>Telephone</b> (636) 273-3900	
	MO 63040-1203	Level of Care: ALF**	
Mailing Address 251 PLAZA DRIVE WILDWOOD	MO 63040-1203	County SAINT LOUIS COUNTY Region 7	DMH Licensed No Facility Number 31049
WILLIWOOD	1410 03040-1203	region /	Facility Number 31049
PLEASANT HILL HEALTH AND RE	HABILITATION CENTER		
1300 BROADWAY		<b>Telephone</b> (816) 540-2116	Alzheimer's Unit Yes
PLEASANT HILL	MO 64080-1842	Level of Care: SNF	<b>Bed Capacity</b> 90
Mailing Address 1300 BROADWAY		County CASS	<b>DMH Licensed</b> No
PLEASANT HILL	MO 64080-1842	Region 3 Medicare/Medicaid	Facility Number 15101

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PLEASANT VALLEY MANOR				
213 DAVIS DR		<b>Telephone</b> (417) 257-0179	Alzheimer's Unit	No
WEST PLAINS	MO 65775-2274	Level of Care: RCF*	Bed Capacity	72
Mailing Address 213 DAVIS DR		County HOWELL	DMH Licensed	No
WEST PLAINS	MO 65775-2274	Region 2	Facility Number	13641
PLEASANT VALLEY MANOR CAR	RE CENTER			
6814 SOBBIE RD		<b>Telephone</b> (816) 781-5277	Alzheimer's Unit	No
LIBERTY	MO 64068-9555	Level of Care: SNF	<b>Bed Capacity</b>	102
Mailing Address 6814 SOBBIE RD		County CLAY	DMH Licensed	No
LIBERTY	MO 64068-9555	Region 4 Medicare/Medicaid	Facility Number	06020
PLEASANT VIEW				
641 EUCLID AVE		<b>Telephone</b> (573) 406-1090	Alzheimer's Unit	No
HANNIBAL	MO 63401-2959	Level of Care: ALF**	Bed Capacity	41
Mailing Address 641 EUCLID AVE		County MARION	DMH Licensed	No
HANNIBAL	MO 63401-2959	Region 5	Facility Number	25358
11 11 11 12 12	110 00 101 2505	Region 5	Tuesday Tuesday	23330
	_			
PLEASANT VIEW NURSING HOME	E.	T. 1 (650) 744 5050		3.7
470 RAINBOW DR	NO 64400 1641	<b>Telephone</b> (660) 744-6252	Alzheimer's Unit	No
ROCK PORT	MO 64482-1641	Level of Care: SNF	Bed Capacity	60 N
Mailing Address PO BOX 273	140, 64402,0272	County ATCHISON	DMH Licensed	No
ROCK PORT	MO 64482-0273	Region 4 Medicare/Medicaid	Facility Number	06041
POINT LOOKOUT NURSING & RE	НАВ			
11103 HISTORIC HIGHWAY 165		<b>Telephone</b> (417) 334-4105	Alzheimer's Unit	Yes
11103 HISTORIC HIGHWAY 165 HOLLISTER	MO 65672-6239	Level of Care: SNF	Bed Capacity	130
11103 HISTORIC HIGHWAY 165 HOLLISTER Mailing Address 11103 HISTORIC HI	MO 65672-6239 GHWAY 165	Level of Care: SNF County TANEY	Bed Capacity DMH Licensed	130 No
11103 HISTORIC HIGHWAY 165 HOLLISTER	MO 65672-6239	Level of Care: SNF	Bed Capacity	130
11103 HISTORIC HIGHWAY 165 HOLLISTER Mailing Address 11103 HISTORIC HI	MO 65672-6239 GHWAY 165	Level of Care: SNF County TANEY	Bed Capacity DMH Licensed	130 No
11103 HISTORIC HIGHWAY 165 HOLLISTER Mailing Address 11103 HISTORIC HI HOLLISTER  POPA GOOD SAMARITAN SERVICE	MO 65672-6239 GHWAY 165 MO 65672-6239	Level of Care: SNF County TANEY Region 1 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number	130 No 12716
11103 HISTORIC HIGHWAY 165 HOLLISTER Mailing Address 11103 HISTORIC HI HOLLISTER  POPA GOOD SAMARITAN SERVICE 16979 HWY 39	MO 65672-6239 GHWAY 165 MO 65672-6239 CES, LLC	Level of Care: SNF County TANEY Region 1 Medicare/Medicaid  Telephone (417) 353-4448	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	130 No 12716 Yes
11103 HISTORIC HIGHWAY 165 HOLLISTER Mailing Address 11103 HISTORIC HI HOLLISTER  POPA GOOD SAMARITAN SERVICE 16979 HWY 39 VERONA	MO 65672-6239 GHWAY 165 MO 65672-6239	Level of Care: SNF County TANEY Region 1 Medicare/Medicaid  Telephone (417) 353-4448 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	130 No 12716 Yes 8
11103 HISTORIC HIGHWAY 165 HOLLISTER Mailing Address 11103 HISTORIC HI HOLLISTER  POPA GOOD SAMARITAN SERVIO 16979 HWY 39 VERONA Mailing Address 16979 HWY 39	MO 65672-6239 GHWAY 165 MO 65672-6239 CES, LLC MO 65769-6319	Level of Care: SNF County TANEY Region 1 Medicare/Medicaid  Telephone (417) 353-4448 Level of Care: ALF** County LAWRENCE	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	130 No 12716 Yes 8 No
11103 HISTORIC HIGHWAY 165 HOLLISTER Mailing Address 11103 HISTORIC HI HOLLISTER  POPA GOOD SAMARITAN SERVICE 16979 HWY 39 VERONA	MO 65672-6239 GHWAY 165 MO 65672-6239 CES, LLC	Level of Care: SNF County TANEY Region 1 Medicare/Medicaid  Telephone (417) 353-4448 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	130 No 12716 Yes 8
11103 HISTORIC HIGHWAY 165 HOLLISTER Mailing Address 11103 HISTORIC HI HOLLISTER  POPA GOOD SAMARITAN SERVIO 16979 HWY 39 VERONA Mailing Address 16979 HWY 39	MO 65672-6239 GHWAY 165 MO 65672-6239 CES, LLC MO 65769-6319	Level of Care: SNF County TANEY Region 1 Medicare/Medicaid  Telephone (417) 353-4448 Level of Care: ALF** County LAWRENCE	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	130 No 12716 Yes 8 No
11103 HISTORIC HIGHWAY 165 HOLLISTER Mailing Address 11103 HISTORIC HI HOLLISTER  POPA GOOD SAMARITAN SERVIO 16979 HWY 39 VERONA Mailing Address 16979 HWY 39	MO 65672-6239 GHWAY 165 MO 65672-6239 CES, LLC MO 65769-6319 MO 65769-6319	Level of Care: SNF County TANEY Region 1 Medicare/Medicaid  Telephone (417) 353-4448 Level of Care: ALF** County LAWRENCE	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	130 No 12716 Yes 8 No
11103 HISTORIC HIGHWAY 165 HOLLISTER Mailing Address 11103 HISTORIC HI HOLLISTER  POPA GOOD SAMARITAN SERVIO 16979 HWY 39 VERONA Mailing Address 16979 HWY 39 VERONA	MO 65672-6239 GHWAY 165 MO 65672-6239 CES, LLC MO 65769-6319 MO 65769-6319	Level of Care: SNF County TANEY Region 1 Medicare/Medicaid  Telephone (417) 353-4448 Level of Care: ALF** County LAWRENCE	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	130 No 12716 Yes 8 No
11103 HISTORIC HIGHWAY 165 HOLLISTER Mailing Address 11103 HISTORIC HI HOLLISTER  POPA GOOD SAMARITAN SERVIO 16979 HWY 39 VERONA Mailing Address 16979 HWY 39 VERONA PORTAGEVILLE HEALTH CARE	MO 65672-6239 GHWAY 165 MO 65672-6239 CES, LLC MO 65769-6319 MO 65769-6319	Level of Care: SNF County TANEY Region 1 Medicare/Medicaid  Telephone (417) 353-4448 Level of Care: ALF** County LAWRENCE Region 1	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	130 No 12716 Yes 8 No 30440
HOLLISTER Mailing Address 11103 HISTORIC HI HOLLISTER  POPA GOOD SAMARITAN SERVIO 16979 HWY 39 VERONA Mailing Address 16979 HWY 39 VERONA  PORTAGEVILLE HEALTH CARE 6 290 WEST STATE HWY 162	MO 65672-6239 GHWAY 165 MO 65672-6239  CES, LLC MO 65769-6319 MO 65769-6319  CENTER	Level of Care: SNF County TANEY Region 1 Medicare/Medicaid  Telephone (417) 353-4448 Level of Care: ALF** County LAWRENCE Region 1  Telephone (573) 379-2017	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	130 No 12716 Yes 8 No 30440
11103 HISTORIC HIGHWAY 165 HOLLISTER Mailing Address 11103 HISTORIC HI HOLLISTER  POPA GOOD SAMARITAN SERVIO 16979 HWY 39 VERONA Mailing Address 16979 HWY 39 VERONA  PORTAGEVILLE HEALTH CARE 62 290 WEST STATE HWY 162 PORTAGEVILLE	MO 65672-6239 GHWAY 165 MO 65672-6239  CES, LLC MO 65769-6319 MO 65769-6319  CENTER	Level of Care: SNF County TANEY Region 1 Medicare/Medicaid  Telephone (417) 353-4448 Level of Care: ALF** County LAWRENCE Region 1  Telephone (573) 379-2017 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	130 No 12716 Yes 8 No 30440
11103 HISTORIC HIGHWAY 165 HOLLISTER Mailing Address 11103 HISTORIC HI HOLLISTER  POPA GOOD SAMARITAN SERVIO 16979 HWY 39 VERONA Mailing Address 16979 HWY 39 VERONA  PORTAGEVILLE HEALTH CARE OF SERVIOLE HEALTH CARE OF SERVICE HEA	MO 65672-6239 GHWAY 165 MO 65672-6239  CES, LLC  MO 65769-6319  MO 65769-6319  CENTER  MO 63873-9397	Level of Care: SNF County TANEY Region 1 Medicare/Medicaid  Telephone (417) 353-4448 Level of Care: ALF** County LAWRENCE Region 1  Telephone (573) 379-2017 Level of Care: SNF County NEW MADRID	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	130 No 12716 Yes 8 No 30440
11103 HISTORIC HIGHWAY 165 HOLLISTER Mailing Address 11103 HISTORIC HI HOLLISTER  POPA GOOD SAMARITAN SERVIO 16979 HWY 39 VERONA Mailing Address 16979 HWY 39 VERONA  PORTAGEVILLE HEALTH CARE 6 290 WEST STATE HWY 162 PORTAGEVILLE Mailing Address PO BOX 408 PORTAGEVILLE PORTIA'S RESIDENTIAL CARE	MO 65672-6239 GHWAY 165 MO 65672-6239  CES, LLC  MO 65769-6319  MO 65769-6319  CENTER  MO 63873-9397	Level of Care: SNF County TANEY Region 1 Medicare/Medicaid  Telephone (417) 353-4448 Level of Care: ALF** County LAWRENCE Region 1  Telephone (573) 379-2017 Level of Care: SNF County NEW MADRID Region 2 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	130 No 12716 Yes 8 No 30440 No 60 No 17119
11103 HISTORIC HIGHWAY 165 HOLLISTER Mailing Address 11103 HISTORIC HI HOLLISTER  POPA GOOD SAMARITAN SERVIO 16979 HWY 39 VERONA Mailing Address 16979 HWY 39 VERONA  PORTAGEVILLE HEALTH CARE 6 290 WEST STATE HWY 162 PORTAGEVILLE Mailing Address PO BOX 408 PORTAGEVILLE PORTAGEVILLE  PORTIA'S RESIDENTIAL CARE 307 NORTH BROADWAY	MO 65672-6239 GHWAY 165 MO 65672-6239  CES, LLC  MO 65769-6319  MO 65769-6319  CENTER  MO 63873-9397  MO 63873-0408	Level of Care: SNF County TANEY Region 1 Medicare/Medicaid  Telephone (417) 353-4448 Level of Care: ALF** County LAWRENCE Region 1  Telephone (573) 379-2017 Level of Care: SNF County NEW MADRID Region 2 Medicare/Medicaid  Telephone (573) 686-3446	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	130 No 12716 Yes 8 No 30440 No 17119
11103 HISTORIC HIGHWAY 165 HOLLISTER Mailing Address 11103 HISTORIC HI HOLLISTER  POPA GOOD SAMARITAN SERVIO 16979 HWY 39 VERONA Mailing Address 16979 HWY 39 VERONA  PORTAGEVILLE HEALTH CARE 290 WEST STATE HWY 162 PORTAGEVILLE Mailing Address PO BOX 408 PORTAGEVILLE PORTAGEVILLE  PORTIA'S RESIDENTIAL CARE 307 NORTH BROADWAY POPLAR BLUFF	MO 65672-6239 GHWAY 165 MO 65672-6239  CES, LLC  MO 65769-6319  MO 65769-6319  CENTER  MO 63873-9397  MO 63873-0408	Level of Care: SNF County TANEY Region 1 Medicare/Medicaid  Telephone (417) 353-4448 Level of Care: ALF** County LAWRENCE Region 1  Telephone (573) 379-2017 Level of Care: SNF County NEW MADRID Region 2 Medicare/Medicaid  Telephone (573) 686-3446 Level of Care: RCF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	130 No 12716 Yes 8 No 30440 No 17119
11103 HISTORIC HIGHWAY 165 HOLLISTER Mailing Address 11103 HISTORIC HI HOLLISTER  POPA GOOD SAMARITAN SERVIO 16979 HWY 39 VERONA Mailing Address 16979 HWY 39 VERONA  PORTAGEVILLE HEALTH CARE 6 290 WEST STATE HWY 162 PORTAGEVILLE Mailing Address PO BOX 408 PORTAGEVILLE PORTAGEVILLE  PORTIA'S RESIDENTIAL CARE 307 NORTH BROADWAY	MO 65672-6239 GHWAY 165 MO 65672-6239  CES, LLC  MO 65769-6319  MO 65769-6319  CENTER  MO 63873-9397  MO 63873-0408	Level of Care: SNF County TANEY Region 1 Medicare/Medicaid  Telephone (417) 353-4448 Level of Care: ALF** County LAWRENCE Region 1  Telephone (573) 379-2017 Level of Care: SNF County NEW MADRID Region 2 Medicare/Medicaid  Telephone (573) 686-3446	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	130 No 12716 Yes 8 No 30440 No 17119

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<sup>\*</sup> Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

<sup>\*\*</sup> Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

POTOSI					
POTOSI	POTOSI MANOR				
Mailing Address 307 SOUTH HIGHWAY 21			- · · · · · · · · · · · · · · · · · · ·		
PARIRE VIEW SKILLED NURSING   Facility Number   Control				= -	
### County   PRIMINGS   PRIMING   PR	e				
Formation	POTOSI	MO 63664-9317	Region 2 Medicare/Medicaid	Facility Number	21648
BLOOMFIELD   MO 63825-9706   Level of Carre   SNF   Bed Capacity   Mo Mailing Address 806 WEST MISSOURI ST   MO 63825-9706   Region   2   Medicare/Medicaid   Facility Number   Mo Region   2   Medicare/Medicaid   Mo Region   Mo Region   2   Medicare/Medicaid   Mo Region   Mo Regi	PRAIRIE VIEW SKILLED NURSING	<b>3</b>			
BLOOMFELD	606 WEST MISSOURI ST		<b>Telephone</b> (573) 568-2137	Alzheimer's Unit	No
Mailling Address 606 WEST MISSOURI ST   No 63825-9706   Region 2   Medicare/Medicald   Facility Number   00629	BLOOMFIELD	MO 63825-9706	-	Bed Capacity	60
PREFERRED FAMILY HEALTHCARE, INC	Mailing Address 606 WEST MISSOUR	RIST	County STODDARD	= -	No
Section   Sec			Region 2 Medicare/Medicaid	Facility Number	00629
Section   Sec	PREFERRED FAMILY HEALTHCA	RE. INC			
RIRKSVILLE		, · ·	<b>Telephone</b> (660) 665-1962	Alzheimer's Unit	No
Mailing Address PO BOX 767   County   ADAIR   Pacility Number   21851		MO 63501-4520	• '		
PRIMROSE OF SEDALIA	Mailing Address PO BOX 767				Yes
Telephome   G600   527-7054   Alzheimer's Unit   No   SEDALIA   MO   65301-2524   Level of Care:   ALF**   Bed Capacity   90   Mailing Address 3761 WEST 10TH ST   County   PETTIS   DMH Licensed   No   SEDALIA   MO   65301-2524   Region   6   Facility Number   25967	_	MO 63501-0767	•		21851
Telephome   G600   527-7054   Alzheimer's Unit   No   SEDALIA   MO   65301-2524   Level of Care:   ALF™*   Bed Capacity   90   Mailing Address 3761 WEST 10TH ST   County   PETTIS   DMH Licensed   No   SEDALIA   MO   65301-2524   Region   6   Facility Number   25967	DDIMBOSE OF SEDALIA				
SEDALIA   MO 65301-2524   Level of Care: ALF**   Bed Capacity   90			Talanhana (660) 527 7054	Alzhaiman's Unit	No
Mailing Address 3761 WEST 10TH ST SEDALIA  MO 65301-2524  Region 6  Region 7  Region 7  Region 8  Region 9  Region 8  Region 9  Region 8  Region 9  Region 8  Region 8  Region 9  Region 8  Region 9  Region		MO 65301-2524			
PRIMROSE RETIREMENT COMMUNITY OF JEFFERSON CITY					
PRIMROSE RETIREMENT COMMUNITY OF JEFFERSON CITY  1214 FREEDOM BLVD  JEFFERSON CITY  MO 65109-0082  Level of Care: ALF**  Mailing Address 1214 FREEDOM BLVD  Ounty  Region 6  Pacility Number  29697  PRIMROSE RETIREMENT COMMUNITY OF KANSAS CITY  8559 NORTH LINE CREEK PARKWAY  AMAIling Address 8559 NORTH LINE CREEK PARKWAY  Mo 64154-2100  Region 4  Telephone  (816) 468-8282  Alzheimer's Unit  No KANSAS CITY  MO 64154-2100  Level of Care: ALF**  Bed Capacity  44  Mailing Address 8559 NORTH LINE CREEK PARKWAY  County  PLATTE  DMH Licensed  No KANSAS CITY  MO 64154-2100  Region 4  Facility Number  29020  PRINCETON SENIOR LIVING THE  1701 S E OLDHAM PARKWAY  Level of Care: ALF**  Bed Capacity  68  Mailing Address 1701 S E OLDHAM PARKWAY  County  JACKSON  DMH Licensed  No Mo 64081-  Level of Care: ALF**  Bed Capacity  68  Mailing Address 1701 S E OLDHAM PARKWAY  County  JACKSON  DMH Licensed  No Level of Care: ALF**  Bed Capacity  68  Mailing Address 1701 S E OLDHAM PARKWAY  County  JACKSON  DMH Licensed  No DHH Licensed  No PROMENADE SENIOR LIVING  Region 3  Facility Number  32762  PROMENADE SENIOR LIVING  Region 3  Facility Number  32762	8		• • • •		
Telephone   (573) 634-5408   Alzheimer's Unit   No	SEPTERT	110 03301 2324	Region 0	Pacinty Number	23907
DEFFERSON CITY   MO 65109-0082   Level of Care: ALF**   Bed Capacity   49		UNITY OF JEFFERSON CITY			
Mailing Address 1214 FREEDOM BLVD  JEFFERSON CITY  MO 65109-0082  Region 6  Region 6  Region 6  Region 6  Region 7  Region 6  Region 7  Region 7  Region 7  Region 8  Region 8  Region 8  Region 8  Region 8  Region 8  Region 9			• '		
PRIMROSE RETIREMENT COMMUNITY OF KANSAS CITY  8559 NORTH LINE CREEK PARKWAY  MO 64154-2100  KANSAS CITY  MO 64081-  Level of Care: ALF**  Bed Capacity  Alzheimer's Unit  Yes  LEE'S SUMMIT  MO 64081-  Level of Care: ALF**  Bed Capacity  68  Mailing Address 1701 S E OLDHAM PARKWAY  County  JACKSON  DMH Licensed  No  LEE'S SUMMIT  MO 64081-  Region 3  Facility Number  32762  PROMENADE SENIOR LIVING  8825 EAGER ROAD  Telephone  (314) 325-7699  Alzheimer's Unit  Yes  SAINT LOUIS  MO 63144-1205  Level of Care: ALF**  Bed Capacity  90  Mailing Address 8825 EAGER ROAD  Level of Care: ALF**  Bed Capacity  90  Mailing Address 8825 EAGER ROAD  No  County  SAINT LOUIS COUNTY  DMH Licensed  No				= :	
PRIMROSE RETIREMENT COMMUNITY OF KANSAS CITY  8559 NORTH LINE CREEK PARKWAY KANSAS CITY MO 64154-2100 Level of Care: ALF** Bed Capacity 44 Mailing Address 8559 NORTH LINE CREEK PARKWAY County PLATTE DMH Licensed No KANSAS CITY MO 64154-2100 Region 4 Facility Number 29020  PRINCETON SENIOR LIVING THE  1701 S E OLDHAM PARKWAY Telephone 1816 875-4950 Level of Care: ALF** Bed Capacity 68 Mailing Address 1701 S E OLDHAM PARKWAY County Lee's SUMMIT MO 64081- Level of Care: ALF** Bed Capacity 68 Mailing Address 1701 S E OLDHAM PARKWAY County Lee's SUMMIT MO 64081- Region 3 Facility Number 32762  PROMENADE SENIOR LIVING  8825 EAGER ROAD Telephone 1314 325-7699 Alzheimer's Unit Yes SAINT LOUIS MO 63144-1205 Level of Care: ALF** Bed Capacity 90 Mailing Address 8825 EAGER ROAD County SAINT LOUIS COUNTY DMH Licensed No	_		•		
Region   Serior Living The   Serior   Serior   Mo 64154-2100   Level of Care:   ALF**   Bed Capacity   44   Mailing Address 8559 NORTH LINE CREEK PARKWAY   County   PLATTE   DMH Licensed   No KANSAS CITY   MO 64154-2100   Region   4   Facility Number   29020	JEFFERSON CITY	MO 65109-0082	Region 6	Facility Number	29697
KANSAS CITY         MO 64154-2100         Level of Care: ALF**         ALF**         Bed Capacity         44           Mailing Address 8559 NORTH LINE CREEK PARKWAY         County         PLATTE         DMH Licensed         No           KANSAS CITY         MO 64154-2100         Region 4         Facility Number         29020           PRINCETON SENIOR LIVING THE           1701 S E OLDHAM PARKWAY         Telephone         (816) 875-4950         Alzheimer's Unit         Yes           LEE'S SUMMIT         MO 64081-         Level of Care: ALF**         Bed Capacity         68           Mailing Address 1701 S E OLDHAM PARKWAY         County         JACKSON         DMH Licensed         No           LEE'S SUMMIT         MO 64081-         Region 3         Facility Number         32762           PROMENADE SENIOR LIVING           8825 EAGER ROAD         Telephone         (314) 325-7699         Alzheimer's Unit         Yes           SAINT LOUIS         MO 63144-1205         Level of Care: ALF**         Bed Capacity         90           Mailing Address 8825 EAGER ROAD         County         SAINT LOUIS COUNTY         DMH Licensed         No	PRIMROSE RETIREMENT COMMU	UNITY OF KANSAS CITY			
Mailing Address 8559 NORTH LINE CREEK PARKWAY KANSAS CITY       County MO 64154-2100       PLATTE Region 4       DMH Licensed Facility Number       No         PRINCETON SENIOR LIVING THE         1701 S E OLDHAM PARKWAY       Telephone       (816) 875-4950       Alzheimer's Unit       Yes         LEE'S SUMMIT       MO 64081-       Level of Care:       ALF**       Bed Capacity       68         Mailing Address 1701 S E OLDHAM PARKWAY       County       JACKSON       DMH Licensed       No         LEE'S SUMMIT       MO 64081-       Region 3       Facility Number       32762         PROMENADE SENIOR LIVING         8825 EAGER ROAD       Telephone       (314) 325-7699       Alzheimer's Unit       Yes         SAINT LOUIS       MO 63144-1205       Level of Care:       ALF**       Bed Capacity       90         Mailing Address 8825 EAGER ROAD       County       SAINT LOUIS COUNTY       DMH Licensed       No	8559 NORTH LINE CREEK PARKWA	Y	<b>Telephone</b> (816) 468-8282	Alzheimer's Unit	No
Region 4         Facility Number         29020           PRINCETON SENIOR LIVING THE           1701 S E OLDHAM PARKWAY         Telephone         (816) 875-4950         Alzheimer's Unit         Yes           LEE'S SUMMIT         MO 64081-         Level of Care:         ALF**         Bed Capacity         68           Mailing Address 1701 S E OLDHAM PARKWAY         County         JACKSON         DMH Licensed         No           LEE'S SUMMIT         MO 64081-         Region 3         Facility Number         32762           PROMENADE SENIOR LIVING           8825 EAGER ROAD         Telephone         (314) 325-7699         Alzheimer's Unit         Yes           SAINT LOUIS         MO 63144-1205         Level of Care:         ALF**         Bed Capacity         90           Mailing Address 8825 EAGER ROAD         County         SAINT LOUIS COUNTY         DMH Licensed         No					
PRINCETON SENIOR LIVING THE  1701 S E OLDHAM PARKWAY  Telephone LEE'S SUMMIT  MO 64081-  Mailing Address 1701 S E OLDHAM PARKWAY  County JACKSON  DMH Licensed No LEE'S SUMMIT  MO 64081-  Region 3  PROMENADE SENIOR LIVING  8825 EAGER ROAD  SAINT LOUIS  MO 63144-1205  Mo 63144-1205  Moiling Address 8825 EAGER ROAD  County SAINT LOUIS COUNTY  DMH Licensed No Alzheimer's Unit Yes ALF** Bed Capacity 90 Alzheimer's Unit Yes SAINT LOUIS COUNTY DMH Licensed No	Mailing Address 8559 NORTH LINE C	CREEK PARKWAY	<b>County</b> PLATTE	DMH Licensed	No
1701 S E OLDHAM PARKWAY LEE'S SUMMIT MO 64081- Level of Care: ALF** Bed Capacity 68  Mailing Address 1701 S E OLDHAM PARKWAY County LEE'S SUMMIT MO 64081- Region 3  Facility Number 32762  PROMENADE SENIOR LIVING  8825 EAGER ROAD SAINT LOUIS MO 63144-1205 Mo 63144-120	KANSAS CITY	MO 64154-2100	Region 4	Facility Number	29020
LEE'S SUMMIT MO 64081-  Mailing Address 1701 S E OLDHAM PARKWAY  LEE'S SUMMIT MO 64081-  PROMENADE SENIOR LIVING  8825 EAGER ROAD  SAINT LOUIS  MO 63144-1205  MO 63144-1205  MO 63144-1205  MO 64081-  Level of Care: ALF**  ALF**  Bed Capacity  Facility Number  32762  32762  Alzheimer's Unit  Yes  SAINT LOUIS COUNTY  MO 63144-1205  Level of Care: ALF**  Bed Capacity  90  Mailing Address 8825 EAGER ROAD	PRINCETON SENIOR LIVING THE				
Mailing Address 1701 S E OLDHAM PARKWAY       County       JACKSON       DMH Licensed       No         LEE'S SUMMIT       MO 64081-       Region 3       Facility Number       32762         PROMENADE SENIOR LIVING         8825 EAGER ROAD       Telephon-       (314) 325-7699       Alzheimer's Unit       Yes         SAINT LOUIS       MO 63144-1205       Level of Care:       ALF**       Bed Capacity       90         Mailing Address 8825 EAGER ROAD       County       SAINT LOUIS COUNTY       DMH Licensed       No	1701 S E OLDHAM PARKWAY		<b>Telephone</b> (816) 875-4950	Alzheimer's Unit	Yes
Region 3 Facility Number 32762  PROMENADE SENIOR LIVING  8825 EAGER ROAD Telephone (314) 325-7699 Alzheimer's Unit Yes SAINT LOUIS MO 63144-1205 Level of Care: ALF** Bed Capacity 90  Mailing Address 8825 EAGER ROAD Sounty SAINT LOUIS COUNTY DMH Licensed No	LEE'S SUMMIT	MO 64081-	Level of Care: ALF**	Bed Capacity	68
PROMENADE SENIOR LIVING  8825 EAGER ROAD  SAINT LOUIS  MO 63144-1205  Mo 63144-1205  Mo 63144-1205  Mo 63144-1205  County  SAINT LOUIS COUNTY  Mo Noth Licensed  Noth Licensed  Noth Licensed  Noth Licensed	Mailing Address 1701 S E OLDHAM F	PARKWAY	<b>County</b> JACKSON	DMH Licensed	No
8825 EAGER ROADTelephone(314) 325-7699Alzheimer's UnitYesSAINT LOUISMO 63144-1205Level of Care:ALF**Bed Capacity90Mailing Address 8825 EAGER ROADCountySAINT LOUIS COUNTYDMH LicensedNo	LEE'S SUMMIT	MO 64081-	Region 3	Facility Number	32762
SAINT LOUIS MO 63144-1205 <b>Level of Care:</b> ALF** <b>Bed Capacity</b> 90 <b>Mailing Address</b> 8825 EAGER ROAD County SAINT LOUIS COUNTY <b>DMH Licensed</b> No	PROMENADE SENIOR LIVING				
Mailing Address     8825 EAGER ROAD       County     SAINT LOUIS COUNTY       DMH Licensed     No	8825 EAGER ROAD		<b>Telephone</b> (314) 325-7699	Alzheimer's Unit	Yes
·	SAINT LOUIS	MO 63144-1205	Level of Care: ALF**	Bed Capacity	90
SAINT LOUIS MO 63144-1205 Region 7 Facility Number 30363	Mailing Address 8825 EAGED DOAD				
	Walling Address 6623 EAGER ROAD		<b>County</b> SAINT LOUIS COUNTY	DMH Licensed	No

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<sup>\*</sup> Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

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DDOMICE CADE CENTED II C			
PROMISE CARE CENTER, LLC 1111 CARE AVE		<b>Telephone</b> (417) 494-5037	Alzheimer's Unit No
NIXA	MO 65714-9679	Level of Care: RCF	Bed Capacity 126
Mailing Address 1111 CARE AVE	1410 03714-9079	County CHRISTIAN	DMH Licensed No
NIXA	MO 65714-9679	Region 1	Facility Number 15935
NIAA	WO 03714-9079	Region 1	racinty Number 13933
PROVISION OF PROMISE			
4528 NORTH MARKET ST		<b>Telephone</b> (314) 535-5509	Alzheimer's Unit No
SAINT LOUIS	MO 63113-2113	Level of Care: RCF	<b>Bed Capacity</b> 20
Mailing Address 4528 NORTH MARK	ET ST	County SAINT LOUIS CITY	DMH Licensed Yes
SAINT LOUIS	MO 63113-2113	Region 7	Facility Number 17937
PUTNAM COUNTY CARE CENTER			
1814 OAK ST	•	<b>Telephone</b> (660) 947-2492	Alzheimer's Unit NO
UNIONVILLE	MO 63565-1275	Level of Care: SNF	Bed Capacity 60
Mailing Address 1814 OAK ST	1120 00000 1270	County PUTNAM	DMH Licensed No
UNIONVILLE	MO 63565-1275	Region 5 Medicare/Medicaid	Facility Number 06516
		S .	•
PUXICO NURSING & REHABILIAT	TION CENTER		
540 NORTH HIGHWAY 51		<b>Telephone</b> (573) 222-3125	Alzheimer's Unit No
PUXICO	MO 63960-9117	Level of Care: SNF	Bed Capacity 60
Mailing Address 540 NORTH HWY 51	I	County STODDARD	<b>DMH Licensed</b> No
PUXICO	MO 63960-9117	Region 2 Medicare/Medicaid	Facility Number 03163
QUAIL RUN HEALTH CARE CENT	FR		
1405 WEST GRAND AVE	EK	<b>Telephone</b> (816) 632-2151	Alzheimer's Unit No
CAMERON	MO 64429-1118	Level of Care: SNF	Bed Capacity 84
Mailing Address PO BOX 525	110 01127 1110	County DEKALB	DMH Licensed No
CAMERON	MO 64429-0525	Region 4 Medicare/Medicaid	Facility Number 03829
			•
QUALITY RESIDENTIAL CARE			
2034 WEST COLLEGE		<b>Telephone</b> (417) 831-6466	Alzheimer's Unit No
SPRINGFIELD	MO 65806-1524	Level of Care: RCF*	<b>Bed Capacity</b> 42
Mailing Address PO BOX 8127		County GREENE	<b>DMH Licensed</b> Yes
SPRINGFIELD	MO 65801-8127	Region 1	Facility Number 13150
QUARTERS AT DES PERES, THE			
13230 MANCHESTER RD		<b>Telephone</b> (314) 821-2886	Alzheimer's Unit No
DES PERES	MO 63131-1706	Level of Care: SNF	Bed Capacity 147
Mailing Address 13230 MANCHESTE		County SAINT LOUIS COUNTY	DMH Licensed No
DES PERES	MO 63131-1706	Region 7 Medicare/Medicaid	Facility Number 26726
DED LEKEN	03131-1700	region / wiedicare/wiedicald	racinty number 20/20
RANCH RESIDENTIAL CARE FAC	ILITY THE		
ROUTE 2, BOX 2790		<b>Telephone</b> (573) 238-4253	Alzheimer's Unit No
MARBLE HILL	MO 63764-9510	Level of Care: RCF*	<b>Bed Capacity</b> 32
Mailing Address ROUTE 2, BOX 2790			
MARBLE HILL	)	County BOLLINGER	DMH Licensed Yes Facility Number 08707

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DANCHO DEHAR AND HEAT THO	A DE CENTRED		
RANCHO REHAB AND HEALTHCA 615 RANCHO LN	ARE CENTER	<b>Telephone</b> (314) 839-2150	Alzheimer's Unit No
FLORISSANT	MO 63031-1717	Level of Care: SNF	Bed Capacity 120
Mailing Address 615 RANCHO LN	WIO 03031-1717	County SAINT LOUIS COUNTY	DMH Licensed No
FLORISSANT	MO 63031-1717	Region 7 Medicare/Medicaid	Facility Number 02585
LORISSANI	WO 03031-1717	Region / Wiedicale/Wiedicald	racinty Number 02383
RATLIFF CARE CENTER			
717 NORTH SPRIGG		<b>Telephone</b> (573) 335-5810	Alzheimer's Unit No
CAPE GIRARDEAU	MO 63701-4815	Level of Care: SNF	<b>Bed Capacity</b> 46
Mailing Address 717 NORTH SPRIGG	i	County CAPE GIRARDEAU	DMH Licensed No
CAPE GIRARDEAU	MO 63701-4815	Region 2 Medicare/Medicaid	Facility Number 17420
RAVENWOOD - ASSISTED LIVING	DV AMEDICADE		
1950 EAST REPUBLIC RD	BI AMERICARE	<b>Telephone</b> (417) 890-6000	Alzheimer's Unit Yes
SPRINGFIELD	MO 65804-6763	Level of Care: ALF**	Bed Capacity 66
Mailing Address 1950 E REPUBLIC R		County GREENE	DMH Licensed No
SPRINGFIELD	MO 65804-6763	Region 1	Facility Number 20791
SI KII VOI IEED	1410 03004 0703	Kegion 1	racinty (value) 20791
RAVENWOOD TERRACE - ASSIST	ED LIVING BY AMERICARE		
1830 RAVENWOOD		<b>Telephone</b> (660) 263-8004	Alzheimer's Unit Yes
MOBERLY	MO 65270-3002	Level of Care: ALF**	<b>Bed Capacity</b> 55
Mailing Address 1830 RAVENWOOD		County RANDOLPH	<b>DMH Licensed</b> No
MOBERLY	MO 65270-3002	Region 5	Facility Number 16411
REHAB OF KANSAS CITY SOUTH			
8033 HOLMES ROAD		<b>Telephone</b> (816) 363-6222	Alzheimer's Unit No
KANSAS CITY	MO 64131-2115	Level of Care: SNF	Bed Capacity 100
Mailing Address 8033 HOLMES ROA		County JACKSON	DMH Licensed No
KANSAS CITY	MO 64131-2115	Region 3 Medicare/Medicaid	Facility Number 03680
REHABILITATION CENTER OF IN	DEPENDENCE.THE		
1800 S SWOPE DR	· · · <del></del>	<b>Telephone</b> (816) 257-2566	Alzheimer's Unit Yes
INDEPENDENCE	MO 64057-1084	Level of Care: SNF	Bed Capacity 130
Mailing Address 1800 S SWOPE DR		County JACKSON	DMH Licensed No
INDEPENDENCE	MO 64057-1084	Region 3 Medicare/Medicaid	Facility Number 22063
REPUBLIC NURSING & REHAB			
901 EAST HIGHWAY 174		<b>Telephone</b> (417) 732-1822	Alzheimer's Unit Yes
REPUBLIC	MO 65738-1155	Level of Care: SNF	Bed Capacity 127
Mailing Address 901 EAST HIGHWAY		County GREENE	DMH Licensed No
REPUBLIC	MO 65738-1155	Region 1 Medicare/Medicaid	Facility Number 13684
REST HAVEN HEALTH CARE CEN	TER		
1800 SOUTH INGRAM		<b>Telephone</b> (660) 827-0845	Alzheimer's Unit No
SEDALIA	MO 65301-7538	Level of Care: SNF	Bed Capacity 86
Mailing Address 1800 S INGRAM		County PETTIS	DMH Licensed No
SEDALIA	MO 65301-7538	Region 6 Medicare/Medicaid	Facility Number 06582

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RICHLAND CARE CENTER, INC				
400 TRI-COUNTY LANE		<b>Telephone</b> (573) 765-3243	Alzheimer's Unit	No
RICHLAND	MO 65556-8582	Level of Care: SNF	Bed Capacity	86
Mailing Address PO BOX 756	110	County PULASKI	DMH Licensed	No
RICHLAND	MO 65556-0756	Region 6 Medicare/Medicaid	Facility Number	08100
RICHMOND TERRACE ASSISTED	LIVING			
1633 LACLEDE STATION RD	LIVING	<b>Telephone</b> (314) 646-8000	Alzheimer's Unit	No
SAINT LOUIS	MO 63117-2038	Level of Care: ALF**	Bed Capacity	89
Mailing Address 1633 LACLEDE STA		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63117-2038	Region 7	Facility Number	22269
SARVI LOUIS	WO 03117-2030	Kegion /	racinty Number	22209
RIDGE CREST NURSING CENTER				
706 SOUTH MITCHELL		<b>Telephone</b> (660) 429-2177	Alzheimer's Unit	Yes
WARRENSBURG	MO 64093-2828	Level of Care: SNF	<b>Bed Capacity</b>	120
Mailing Address 706 SOUTH MITCH	ELL	County JOHNSON	DMH Licensed	No
WARRENSBURG	MO 64093-2828	Region 3 Medicare/Medicaid	Facility Number	06640
RIDGEVIEW ASSISTED LIVING CI	ENTER			
13134 STATE HIGHWAY 25		<b>Telephone</b> (573) 624-4433	Alzheimer's Unit	No
DEXTER	MO 63841-9740	Level of Care: ALF**	Bed Capacity	26
Mailing Address 13134 STATE HIGH	WAY 25	County STODDARD	DMH Licensed	No
DEXTER	MO 63841-9740	Region 2	Facility Number	10128
DIDGEWAY DEGIDENELAL CADE				
RIDGEWAY RESIDENTIAL CARE		T-l (572) 469 4219	A 1-1	NI-
431 RUSSELL	MO (2000 2220	<b>Telephone</b> (573) 468-4318	Alzheimer's Unit	No
431 RUSSELL SULLIVAN	MO 63080-2228	Level of Care: ALF	<b>Bed Capacity</b>	20
431 RUSSELL SULLIVAN <b>Mailing Address</b> PO BOX 267		Level of Care: ALF County FRANKLIN	Bed Capacity  DMH Licensed	20 Yes
431 RUSSELL SULLIVAN	MO 63080-2228 MO 63080-0267	Level of Care: ALF	<b>Bed Capacity</b>	20
431 RUSSELL SULLIVAN <b>Mailing Address</b> PO BOX 267 SULLIVAN	MO 63080-0267	Level of Care: ALF County FRANKLIN	Bed Capacity  DMH Licensed	20 Yes
431 RUSSELL SULLIVAN <b>Mailing Address</b> PO BOX 267	MO 63080-0267	Level of Care: ALF County FRANKLIN	Bed Capacity  DMH Licensed	20 Yes
431 RUSSELL SULLIVAN Mailing Address PO BOX 267 SULLIVAN RIVER CITY LIVING COMMUNITY	MO 63080-0267	Level of Care: ALF County FRANKLIN Region 6	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	20 Yes 06668
431 RUSSELL SULLIVAN Mailing Address PO BOX 267 SULLIVAN  RIVER CITY LIVING COMMUNIT 3038 WEST TRUMAN BLVD JEFFERSON CITY	MO 63080-0267 Y MO 65109-0525	Level of Care: ALF County FRANKLIN Region 6  Telephone (573) 893-3404 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	20 Yes 06668 Yes 87
431 RUSSELL SULLIVAN Mailing Address PO BOX 267 SULLIVAN  RIVER CITY LIVING COMMUNITY 3038 WEST TRUMAN BLVD	MO 63080-0267 Y MO 65109-0525	Level of Care: ALF County FRANKLIN Region 6  Telephone (573) 893-3404	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	20 Yes 06668 Yes
431 RUSSELL SULLIVAN Mailing Address PO BOX 267 SULLIVAN  RIVER CITY LIVING COMMUNIT 3038 WEST TRUMAN BLVD JEFFERSON CITY Mailing Address 3038 WEST TRUMA	MO 63080-0267  Y  MO 65109-0525  N BLVD	Level of Care: ALF County FRANKLIN Region 6  Telephone (573) 893-3404 Level of Care: SNF County COLE	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	20 Yes 06668 Yes 87 No
431 RUSSELL SULLIVAN Mailing Address PO BOX 267 SULLIVAN  RIVER CITY LIVING COMMUNIT 3038 WEST TRUMAN BLVD JEFFERSON CITY Mailing Address 3038 WEST TRUMA	MO 63080-0267  Y  MO 65109-0525 N BLVD MO 65109-0525	Level of Care: ALF County FRANKLIN Region 6  Telephone (573) 893-3404 Level of Care: SNF County COLE	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	20 Yes 06668 Yes 87 No
431 RUSSELL SULLIVAN Mailing Address PO BOX 267 SULLIVAN  RIVER CITY LIVING COMMUNIT 3038 WEST TRUMAN BLVD JEFFERSON CITY Mailing Address 3038 WEST TRUMA JEFFERSON CITY	MO 63080-0267  Y  MO 65109-0525 N BLVD MO 65109-0525	Level of Care: ALF County FRANKLIN Region 6  Telephone (573) 893-3404 Level of Care: SNF County COLE	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	20 Yes 06668 Yes 87 No
431 RUSSELL SULLIVAN Mailing Address PO BOX 267 SULLIVAN  RIVER CITY LIVING COMMUNIT 3038 WEST TRUMAN BLVD JEFFERSON CITY Mailing Address 3038 WEST TRUMA JEFFERSON CITY  RIVER CROSSING REHAB AND HI	MO 63080-0267  Y  MO 65109-0525 N BLVD MO 65109-0525	Level of Care: ALF County FRANKLIN Region 6  Telephone (573) 893-3404 Level of Care: SNF County COLE Region 6 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	20 Yes 06668 Yes 87 No 04826
431 RUSSELL SULLIVAN Mailing Address PO BOX 267 SULLIVAN  RIVER CITY LIVING COMMUNIT 3038 WEST TRUMAN BLVD JEFFERSON CITY Mailing Address 3038 WEST TRUMA JEFFERSON CITY  RIVER CROSSING REHAB AND HI 11278 SCHUETZ RD SAINT LOUIS	MO 63080-0267  Y  MO 65109-0525 N BLVD MO 65109-0525  EALTHCARE CENTER  MO 63146-4957	Level of Care: ALF County FRANKLIN Region 6  Telephone (573) 893-3404 Level of Care: SNF County COLE Region 6 Medicare/Medicaid  Telephone (314) 991-4066	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	20 Yes 06668 Yes 87 No 04826
431 RUSSELL SULLIVAN Mailing Address PO BOX 267 SULLIVAN  RIVER CITY LIVING COMMUNIT 3038 WEST TRUMAN BLVD JEFFERSON CITY Mailing Address 3038 WEST TRUMA JEFFERSON CITY  RIVER CROSSING REHAB AND HI 11278 SCHUETZ RD	MO 63080-0267  Y  MO 65109-0525 N BLVD MO 65109-0525  EALTHCARE CENTER  MO 63146-4957	Level of Care: ALF County FRANKLIN Region 6  Telephone (573) 893-3404 Level of Care: SNF County COLE Region 6 Medicare/Medicaid  Telephone (314) 991-4066 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	20 Yes 06668 Yes 87 No 04826
431 RUSSELL SULLIVAN Mailing Address PO BOX 267 SULLIVAN  RIVER CITY LIVING COMMUNIT 3038 WEST TRUMAN BLVD JEFFERSON CITY Mailing Address 3038 WEST TRUMA JEFFERSON CITY  RIVER CROSSING REHAB AND HI 11278 SCHUETZ RD SAINT LOUIS Mailing Address 11278 SCHUETZ RD SAINT LOUIS	MO 63080-0267  Y  MO 65109-0525 N BLVD MO 65109-0525  EALTHCARE CENTER  MO 63146-4957 MO 63146-4957	Level of Care: ALF County FRANKLIN Region 6  Telephone (573) 893-3404 Level of Care: SNF County COLE Region 6 Medicare/Medicaid  Telephone (314) 991-4066 Level of Care: SNF County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	20 Yes 06668 Yes 87 No 04826 No
431 RUSSELL SULLIVAN Mailing Address PO BOX 267 SULLIVAN  RIVER CITY LIVING COMMUNIT 3038 WEST TRUMAN BLVD JEFFERSON CITY Mailing Address 3038 WEST TRUMA JEFFERSON CITY  RIVER CROSSING REHAB AND HI 11278 SCHUETZ RD SAINT LOUIS Mailing Address 11278 SCHUETZ RE SAINT LOUIS RIVER MIST - ASSISTED LIVING I	MO 63080-0267  Y  MO 65109-0525 N BLVD MO 65109-0525  EALTHCARE CENTER  MO 63146-4957 MO 63146-4957	Level of Care: ALF County FRANKLIN Region 6  Telephone (573) 893-3404 Level of Care: SNF County COLE Region 6 Medicare/Medicaid  Telephone (314) 991-4066 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	20 Yes 06668 Yes 87 No 04826 No 120 No 16378
431 RUSSELL SULLIVAN Mailing Address PO BOX 267 SULLIVAN  RIVER CITY LIVING COMMUNIT 3038 WEST TRUMAN BLVD JEFFERSON CITY Mailing Address 3038 WEST TRUMA JEFFERSON CITY  RIVER CROSSING REHAB AND HI 11278 SCHUETZ RD SAINT LOUIS Mailing Address 11278 SCHUETZ RE SAINT LOUIS  RIVER MIST - ASSISTED LIVING II 2050 WEST MAUD	MO 63080-0267  Y  MO 65109-0525  N BLVD  MO 65109-0525  EALTHCARE CENTER  MO 63146-4957  MO 63146-4957  BY AMERICARE	Level of Care: ALF County FRANKLIN Region 6  Telephone (573) 893-3404 Level of Care: SNF County COLE Region 6 Medicare/Medicaid  Telephone (314) 991-4066 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (573) 686-2833	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	20 Yes 06668 Yes 87 No 04826 No 120 No 16378
431 RUSSELL SULLIVAN Mailing Address PO BOX 267 SULLIVAN  RIVER CITY LIVING COMMUNIT 3038 WEST TRUMAN BLVD JEFFERSON CITY Mailing Address 3038 WEST TRUMA JEFFERSON CITY  RIVER CROSSING REHAB AND HI 11278 SCHUETZ RD SAINT LOUIS Mailing Address 11278 SCHUETZ RE SAINT LOUIS  RIVER MIST - ASSISTED LIVING II 2050 WEST MAUD POPLAR BLUFF	MO 63080-0267  Y  MO 65109-0525 N BLVD MO 65109-0525  EALTHCARE CENTER  MO 63146-4957 MO 63146-4957	Level of Care: ALF County FRANKLIN Region 6  Telephone (573) 893-3404 Level of Care: SNF County COLE Region 6 Medicare/Medicaid  Telephone (314) 991-4066 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (573) 686-2833 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	20 Yes 06668 Yes 87 No 04826 No 120 No 16378
431 RUSSELL SULLIVAN Mailing Address PO BOX 267 SULLIVAN  RIVER CITY LIVING COMMUNIT 3038 WEST TRUMAN BLVD JEFFERSON CITY Mailing Address 3038 WEST TRUMA JEFFERSON CITY  RIVER CROSSING REHAB AND HI 11278 SCHUETZ RD SAINT LOUIS Mailing Address 11278 SCHUETZ RE SAINT LOUIS  RIVER MIST - ASSISTED LIVING II 2050 WEST MAUD	MO 63080-0267  Y  MO 65109-0525  N BLVD  MO 65109-0525  EALTHCARE CENTER  MO 63146-4957  MO 63146-4957  BY AMERICARE	Level of Care: ALF County FRANKLIN Region 6  Telephone (573) 893-3404 Level of Care: SNF County COLE Region 6 Medicare/Medicaid  Telephone (314) 991-4066 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (573) 686-2833	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	20 Yes 06668 Yes 87 No 04826 No 120 No 16378

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RIVER OAKS CARE CENTER				
1001 NORTH WALNUT		<b>Telephone</b> (573) 695-2121	Alzheimer's Unit	No
STEELE	MO 63877-1355	Level of Care: SNF	Bed Capacity	90
Mailing Address 1001 N WALNUT	1.0	County PEMISCOT	DMH Licensed	No
STEELE	MO 63877-1355	Region 2 Medicare/Medicaid	Facility Number	06672
RIVERBEND HEIGHTS HEALTH &	. DEHADII ITATION			
1221 HIGHWAY 13 SOUTH	KEHABILITATION	<b>Telephone</b> (660) 259-4695	Alzheimer's Unit	No
LEXINGTON	MO 64067-7187	Level of Care: SNF	Bed Capacity	154
Mailing Address 1221 HIGHWAY 13		County LAFAYETTE	DMH Licensed	No
LEXINGTON	MO 64067-7187	•	Facility Number	04333
LLAINGTON	WIO 04007-7107	Region 3 Medicare/Medicaid	racinty Number	04333
RIVERDELL CARE CENTER				
1121 11TH ST		<b>Telephone</b> (660) 882-7600	Alzheimer's Unit	No
BOONVILLE	MO 65233-1419	Level of Care: SNF	<b>Bed Capacity</b>	60
Mailing Address 1121 11TH ST		County COOPER	DMH Licensed	No
BOONVILLE	MO 65233-1419	Region 6 Medicare/Medicaid	Facility Number	14428
PATEROLEGIC CONTROL CO				
RIVERS EDGE CARE HOME LLC		m		NO
802 KENNEDY DRIVE	140 65255	<b>Telephone</b> (660) 530-8414	Alzheimer's Unit	NO 25
WARSAW	MO 65355-	Level of Care: RCF	Bed Capacity	35 N
Mailing Address 802 KENNEDY DRIV		County BENTON	DMH Licensed	No
WARSAW	MO 65355-	Region 6	Facility Number	33521
RIVERSIDE NURSING & REHABIL	ITATION CENTER, LLC			
4700 NW CLIFFVIEW DR		<b>Telephone</b> (816) 741-5105	Alzheimer's Unit	NO
RIVERSIDE	MO 64150-1237	Level of Care: SNF	<b>Bed Capacity</b>	180
Mailing Address 4700 NW CLIFFVIEV	W DR	County PLATTE	DMH Licensed	No
RIVERSIDE	MO 64150-1237	Region 4 Medicare/Medicaid	Facility Number	01532
RIVERVIEW AT THE PARK CARE	AND REHABILITATION CENTER			
1100 PROGRESS PARKWAY	THE REMINDENTATION CENTER	<b>Telephone</b> (573) 883-3454	Alzheimer's Unit	Yes
SAINTE GENEVIEVE	MO 63670-9232	Level of Care: SNF	Bed Capacity	120
Mailing Address 1100 PROGRESS PA		County SAINTE GENEVIEVE	DMH Licensed	No
SAINTE GENEVIEVE	MO 63670-9232	Region 2 Medicare/Medicaid	Facility Number	06729
DIVEDMENTALIBORIO OFFICE				
RIVERVIEW NURSING CENTER		m. 1 (572) (76 212)		N
10303 STATE RD C	MO 65050 1211	<b>Telephone</b> (573) 676-3136	Alzheimer's Unit	No
10303 STATE RD C MOKANE	MO 65059-1211	Level of Care: SNF	<b>Bed Capacity</b>	60
10303 STATE RD C MOKANE <b>Mailing Address</b> 10303 STATE RD C		Level of Care: SNF County CALLAWAY	Bed Capacity DMH Licensed	60 No
10303 STATE RD C MOKANE	MO 65059-1211 MO 65059-1211	Level of Care: SNF	<b>Bed Capacity</b>	60
10303 STATE RD C MOKANE <b>Mailing Address</b> 10303 STATE RD C	MO 65059-1211	Level of Care: SNF County CALLAWAY	Bed Capacity DMH Licensed	60 No
10303 STATE RD C MOKANE <b>Mailing Address</b> 10303 STATE RD C MOKANE	MO 65059-1211	Level of Care: SNF County CALLAWAY Region 6 Medicare/Medicaid  Telephone (417) 581-2510	Bed Capacity DMH Licensed	60 No
10303 STATE RD C MOKANE Mailing Address 10303 STATE RD C MOKANE  RIVERVIEW RESIDENTIAL PLACE 1200 WEST HALL ST OZARK	MO 65059-1211	Level of Care: SNF County CALLAWAY Region 6 Medicare/Medicaid  Telephone (417) 581-2510 Level of Care: RCF*	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	60 No 06730
10303 STATE RD C MOKANE Mailing Address 10303 STATE RD C MOKANE  RIVERVIEW RESIDENTIAL PLACE 1200 WEST HALL ST	MO 65059-1211	Level of Care: SNF County CALLAWAY Region 6 Medicare/Medicaid  Telephone (417) 581-2510	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	60 No 06730 No

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RIVERWAYS MANOR				
403 WATERCRESS RD		<b>Telephone</b> (573) 323-4282		No
	63965-9100	Level of Care: SNF		60
Mailing Address PO BOX 969		County CARTER		No
VAN BUREN MO	63965-0969	Region 2 Medicare/Medicaid	Facility Number 067	44
ROARING RIVER HEALTH AND REHAB	ILITATION			
812 OLD EXETER RD		<b>Telephone</b> (417) 847-2184	Alzheimer's Unit	Zes .
	65625-1704	Level of Care: SNF		90
Mailing Address 812 OLD EXETER RD	03023 1701	County BARRY		No
	65625-1704	Region 1 Medicare/Medicaid	Facility Number 106	
			•	
ROCK ISLAND VILLAGE				
619 EAST 8TH STREET		<b>Telephone</b> (573) 557-9545		l'es
	65026-4740	Level of Care: ALF**		70
Mailing Address 619 EAST 8TH STREET		County MILLER		No
ELDON MO	65026-4740	Region 6	Facility Number 308	365
ROCK POINT NURSING CENTER				
8477 NORTH STREET		<b>Telephone</b> (573) 292-3212	Alzheimer's Unit	<i>l</i> es
BIRCH TREE MO	65438-8887	Level of Care: SNF	Bed Capacity	86
Mailing Address 8477 NORTH STREET		County SHANNON	DMH Licensed	No
BIRCH TREE MO	65438-8887	Region 2 Medicare/Medicaid	Facility Number 005	60
ROCKHILL MANOR ASSISTED LIVING				
4235 LOCUST ST		<b>Telephone</b> (816) 931-2225		No
	64110-1016	Level of Care: ALF**		36
Mailing Address PO BOX 5930		County JACKSON		l'es
KANSAS CITY MO	64171-0930	Region 3	Facility Number 067	94
ROCKHILL MANOR ASSISTED LIVING				
4235 LOCUST ST		<b>Telephone</b> (816) 931-2225	Alzheimer's Unit	No
KANSAS CITY MO	64110-1016	Level of Care: ALF	Bed Capacity 1	54
Mailing Address PO BOX 5930		County JACKSON	DMH Licensed	l'es
KANSAS CITY MO	64171-0930	D . 2	E 314 N 1	94
	041/1-0930	Region 3	Facility Number 067	
ROCKY RIDGE MANOR	04171-0930	Region 3	racinty Number 06/	
ROCKY RIDGE MANOR 3111 HIGHWAY A	04171-0930		·	
3111 HIGHWAY A	65704-8105	Telephone (417) 924-8116 Level of Care: SNF	Alzheimer's Unit	No 65
3111 HIGHWAY A		<b>Telephone</b> (417) 924-8116	Alzheimer's Unit Bed Capacity	No
3111 HIGHWAY A  MANSFIELD MO  Mailing Address 3111 HWY A		Telephone (417) 924-8116 Level of Care: SNF County WRIGHT	Alzheimer's Unit Bed Capacity	No 65 No
3111 HIGHWAY A  MANSFIELD MO  Mailing Address 3111 HWY A	65704-8105	Telephone (417) 924-8116 Level of Care: SNF County WRIGHT	Alzheimer's Unit Bed Capacity DMH Licensed	No 65 No
3111 HIGHWAY A MANSFIELD MO Mailing Address 3111 HWY A MANSFIELD MO  ROLLA PRESBYTERIAN MANOR	65704-8105	Telephone (417) 924-8116 Level of Care: SNF County WRIGHT Region 1 Medicare/Medicaid	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number 049	No 65 No 996
3111 HIGHWAY A MANSFIELD MO Mailing Address 3111 HWY A MANSFIELD MO  ROLLA PRESBYTERIAN MANOR 1200 HOMELIFE PLAZA	65704-8105 65704-8105	Telephone (417) 924-8116 Level of Care: SNF County WRIGHT Region 1 Medicare/Medicaid  Telephone (573) 364-7336	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number 049  Alzheimer's Unit	No 65 No 996
3111 HIGHWAY A MANSFIELD MO Mailing Address 3111 HWY A MANSFIELD MO  ROLLA PRESBYTERIAN MANOR 1200 HOMELIFE PLAZA ROLLA MO	65704-8105	Telephone (417) 924-8116 Level of Care: SNF County WRIGHT Region 1 Medicare/Medicaid  Telephone (573) 364-7336 Level of Care: ALF**	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number 049  Alzheimer's Unit Bed Capacity	No 65 No 996
3111 HIGHWAY A MANSFIELD MO Mailing Address 3111 HWY A MANSFIELD MO  ROLLA PRESBYTERIAN MANOR 1200 HOMELIFE PLAZA ROLLA MO Mailing Address 1200 HOMELIFE PLAZA	65704-8105 65704-8105	Telephone (417) 924-8116 Level of Care: SNF County WRIGHT Region 1 Medicare/Medicaid  Telephone (573) 364-7336	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number 049  Alzheimer's Unit Bed Capacity	No 65 No 996 Yes 37

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ROLLA PRESBYTERIAN MANOR				
1200 HOMELIFE PLAZA		<b>Telephone</b> (573) 364-7336	Alzheimer's Unit	No
ROLLA	MO 65401-2512	Level of Care: SNF		30
Mailing Address 1200 HOMELIFE PLAZ		County PHELPS		No
ROLLA	MO 65401-2512	Region 6 Medicare/Medicaid	Facility Number 187	27
ROSEWOOD REHAB AND HEALTHO	CARE CENTER			
1415 WEST WHITE OAK	CIRC CENTER	<b>Telephone</b> (816) 254-3500	Alzheimer's Unit Y	es.
	MO 64050-2590	Level of Care: SNF		00
Mailing Address 1415 WEST WHITE O.		County JACKSON		No
INDEPENDENCE	MO 64050-2590	Region 3 Medicare/Medicaid	Facility Number 066	
		interior (interior)		
ROSEWOOD RESIDENTIAL CARE				
13450 COUNTY RD 7040		<b>Telephone</b> (573) 341-8000		No
ROLLA	MO 65401-8122	Level of Care: RCF	Bed Capacity	9
Mailing Address 13450 COUNTY RD 70	040	County PHELPS		No
ROLLA	MO 65401-8122	Region 6	Facility Number 210	83
ROYAL OAKS CARE CENTER LLC				
507 EAST MARSHALL		<b>Telephone</b> (660) 530-3168	Alzheimer's Unit	No
SWEET SPRINGS	MO 65351-9759	Level of Care: ALF	Bed Capacity	51
Mailing Address PO BOX 204		County SALINE	DMH Licensed Y	l'es
e e e e e e e e e e e e e e e e e e e	MO 65351-0204	Region 5	Facility Number 149	53
SAGE NURSING & REHAB				
3421 GASCONADE ST		<b>Telephone</b> (314) 832-4700	Alzheimer's Unit	No
SAINT LOUIS	MO 63118-4201	Level of Care: SNF	Bed Capacity 1	20
Mailing Address 3421 GASCONADE ST	Γ	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS	MO 63118-4201	Region 7 Medicare/Medicaid	Facility Number 214	55
SALEM CARE CENTER				
1203 NORTH JACKSON		<b>Telephone</b> (573) 729-6649	Alzheimer's Unit	No
	MO 65560-1076	Level of Care: SNF		60
Mailing Address 1203 NORTH JACKSO		County DENT		No
SALEM	MO 65560-1076	Region 6 Medicare/Medicaid	Facility Number 023	
		Trouteur (/Trouteuru		
SALEM RESIDENTIAL CARE				
1207 EAST ROOSEVELT ST		<b>Telephone</b> (573) 729-9449		No
SALEM	MO 65560-9676	Level of Care: RCF*		35
Mailing Address 1207 EAST ROOSEVE		County DENT		No
SALEM	MO 65560-9676	Region 6	Facility Number 197	46
SALT RIVER COMMUNITY CARE				
142 SHELBY PLAZA RD		<b>Telephone</b> (573) 588-4175	Alzheimer's Unit Y	es
SHELBINA	MO 63468-1065	Level of Care: SNF	Bed Capacity 1	20
Mailing Address PO BOX 529		County SHELBY	DMH Licensed	No
SHELBINA	MO 63468-0529	Region 5 Medicare/Medicaid	Facility Number 069	34

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SCENIC MUDGING AND DEHADILE	TATION CENTED II C		
SCENIC NURSING AND REHABILI'	TATION CENTER, LLC	T-lh (626) 021 2005	Alabataa ada Tiata Vaa
1333 SCENIC DR	MO (2010 1550	<b>Telephone</b> (636) 931-2995	Alzheimer's Unit Yes
HERCULANEUM	MO 63048-1550	Level of Care: SNF	Bed Capacity 189
Mailing Address 1333 SCENIC DR		County JEFFERSON	<b>DMH Licensed</b> No
HERCULANEUM	MO 63048-1550	Region 2 Medicare/Medicaid	Facility Number 09605
SCHUYLER COUNTY NURSING HO	OME		
1306 US HIGHWAY 63	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<b>Telephone</b> (660) 766-2291	Alzheimer's Unit No
OUEEN CITY	MO 63561-2251	Level of Care: SNF	Bed Capacity 60
		County SCHUYLER	DMH Licensed No
Mailing Address 1306 US HIGHWAY		• _	
QUEEN CITY	MO 63561-2251	Region 5 Medicare/Medicaid	Facility Number 07004
SEASONS REHAB AND HEALTHCA	ARE CENTER		
15600 WOODS CHAPEL RD		<b>Telephone</b> (816) 478-4757	Alzheimer's Unit Yes
KANSAS CITY	MO 64139-1261	Level of Care: SNF	<b>Bed Capacity</b> 78
Mailing Address 15600 WOODS CHAI	PEL RD	County JACKSON	DMH Licensed No
KANSAS CITY	MO 64139-1261	Region 3 Medicare/Medicaid	Facility Number 23712
MINORIO CITT	110 01137 1201	Region 5 Medicare/Medicard	rucinty runner 25/12
SECRET GARDENS			
351 KEITH ST		<b>Telephone</b> (573) 518-0444	Alzheimer's Unit No
PARK HILLS	MO 63601-2049	Level of Care: RCF	Bed Capacity 10
Mailing Address PO BOX 481		County SAINT FRANCOIS	DMH Licensed Yes
PARK HILLS	MO 63601-0481	Region 2	Facility Number 17813
		ū	
SENATH SOUTH HEALTH CARE C	ENTER		
300 EAST HORNBECK ST		<b>Telephone</b> (573) 738-2627	Alzheimer's Unit No
SENATH	MO 63876-9225	Level of Care: SNF	<b>Bed Capacity</b> 150
Mailing Address PO BOX 940		County DUNKLIN	<b>DMH Licensed</b> No
SENATH	MO 63876-0940	Region 2 Medicare/Medicaid	Facility Number 16147
SENECA HOME PLACE			
2400 SOUTH CHEROKEE AVE		<b>Telephone</b> (417) 776-8053	Alzheimer's Unit No
SENECA	MO 64865-9323	Level of Care: RCF*	Bed Capacity 30
Mailing Address 2400 SOUTH CHERO		County NEWTON	DMH Licensed No
SENECA	MO 64865-9323	Region 1	Facility Number 17571
SENECA NURSING			
914 CHICKESAW ST		<b>Telephone</b> (417) 776-8041	Alzheimer's Unit No
SENECA	MO 64865-9281	Level of Care: SNF	Bed Capacity 80
Mailing Address 914 CHICKESAW ST		County NEWTON	DMH Licensed No
SENECA	MO 64865-9281	Region 1 Medicare/Medicaid	Facility Number 17090
52.26.1	01000 /201	region 1 medicare/medicard	1,000
SEVILLE CARE CENTER			
35625 HIGHWAY 72		<b>Telephone</b> (573) 729-6141	Alzheimer's Unit No
SALEM	MO 65560-7217	Level of Care: SNF	<b>Bed Capacity</b> 90
Mailing Address 35625 HIGHWAY 72		County DENT	<b>DMH Licensed</b> No
SALEM	MO 65560-0746	Region 6 Medicare/Medicaid	Facility Number 07110

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SHADY OAKS HEALTHCARE CE	ENTER			
335 BUSINESS ROUTE 63		<b>Telephone</b> (417) 264-7256	Alzheimer's Unit	No
THAYER	MO 65791-1415	Level of Care: SNF	<b>Bed Capacity</b>	120
Mailing Address 335 BUSINESS RO	OUTE 63	County OREGON	DMH Licensed	No
THAYER	MO 65791-1415	Region 2 Medicare/Medicaid	Facility Number	01364
		S		
CHANCELLA REHAD & LIMING	CENTED			
SHANGRI-LA REHAB & LIVING	CENTER	m 1 1 (016) 220 6677		N
930 NORTH EAST DUNCAN RD	MO (4014-0172	<b>Telephone</b> (816) 229-6677	Alzheimer's Unit	No
BLUE SPRINGS	MO 64014-2173	Level of Care: SNF	Bed Capacity	120
Mailing Address 930 NORTH EAST		County JACKSON	DMH Licensed	No
BLUE SPRINGS	MO 64014-2173	Region 3 Medicare/Medicaid	Facility Number	00677
SHELBINA VILLA LIFECARE		<b></b>		
218 EAST SHELBINA AVE		<b>Telephone</b> (573) 588-4115	Alzheimer's Unit	No
SHELBINA	MO 63468-4328	Level of Care: ALF**	Bed Capacity	68
Mailing Address 218 EAST SHELBI	INA AVE	County SHELBY	DMH Licensed	No
SHELBINA	MO 63468-4328	Region 5	Facility Number	18584
SHEPHERD OF THE HILLS LIVI	NG CENTER			
996 STATE HIGHWAY 248		<b>Telephone</b> (417) 334-6431	Alzheimer's Unit	No
BRANSON	MO 65616-8154	Level of Care: SNF	Bed Capacity	100
Mailing Address 996 STATE HWY	248	<b>County</b> TANEY	DMH Licensed	No
BRANSON	MO 65616-8154	Region 1 Medicare/Medicaid	Facility Number	06810
SHEPHERD'S VIEW ASSISTED L	IVING			
100 SHEPHERDS LN		<b>Telephone</b> (417) 778-7959	Alzheimer's Unit	No
ALTON	MO 65606-0429	Level of Care: ALF**	Bed Capacity	39
Mailing Address PO BOX 429		County OREGON	DMH Licensed	No
ALTON	MO 65606-0429	Region 2	Facility Number	23135
SHERBROOKE VILLAGE				
4005 RIPA AVE		<b>Telephone</b> (314) 544-1111	Alzheimer's Unit	Yes
SAINT LOUIS	MO 63125-2378	Level of Care: SNF	Bed Capacity	149
Mailing Address 4005 RIPA AVE		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63125-2378	Region 7 Medicare/Medicaid	Facility Number	15436
SHERBROOKE VILLAGE				
4005 RIPA AVE		<b>Telephone</b> (314) 544-1111	Alzheimer's Unit	Yes
SAINT LOUIS	MO 63125-2378	Level of Care: ALF**	<b>Bed Capacity</b>	88
Mailing Address 4005 RIPA AVE		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63125-2378	Region 7	Facility Number	15436
SHIRKEY NURSING & REHABIL	ITATION CENTER			
804 WOLLARD BLVD		<b>Telephone</b> (816) 776-5403	Alzheimer's Unit	Yes
RICHMOND	MO 64085-2227	Level of Care: SNF	Bed Capacity	197
Mailing Address 804 WOLLARD BI	LVD	<b>County</b> RAY	DMH Licensed	No
RICHMOND	MO 64085-2227	Region 4 Medicare/Medicaid	Facility Number	07289

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SIKESTON CONVALESCENT CENT	TER			
103 KENNEDY DR		<b>Telephone</b> (573) 471-6900	Alzheimer's Unit Yo	
SIKESTON	MO 63801-5126	Level of Care: SNF		20
Mailing Address 103 KENNEDY DR		County SCOTT		No.
SIKESTON	MO 63801-5126	Region 2 Medicare/Medicaid	Facility Number 0733	31
SILEX COMMUNITY CARE				
111 DUNCAN MANSION RD		<b>Telephone</b> (573) 384-5218	Alzheimer's Unit	Vо
SILEX	MO 63377-2229	Level of Care: SNF		60
Mailing Address 111 DUNCAN MANS		County LINCOLN		No
SILEX	MO 63377-2229	Region 5 Medicare/Medicaid	Facility Number 0683	
SILLEA	WIO 03377 222)	Region 5 Medical e/Medicald	Facility Number 0083	,0
SILEX RESIDENTIAL HOME, LLC				
145 DUNCAN MANSION RD		<b>Telephone</b> (573) 384-5213	Alzheimer's Unit	lo.
SILEX	MO 63377-2229	Level of Care: RCF*	Bed Capacity 6	60
Mailing Address 145 DUNCAN MANS	SION RD	County LINCOLN	DMH Licensed Ye	es
SILEX	MO 63377-2229	Region 5	Facility Number 2098	32
SILVER CREEK - ASSISTED LIVIN	IG BY AMERICARE			
3325 TEXAS AVE		<b>Telephone</b> (417) 626-8100	Alzheimer's Unit Yo	es
JOPLIN	MO 64804-4343	Level of Care: ALF**	Bed Capacity	68
Mailing Address 3325 TEXAS AVE		County NEWTON	DMH Licensed N	Vо
JOPLIN	MO 64804-4343	Region 1	Facility Number 2054	11
SILVER SPUR				
3300 TEXAS AVE		<b>Telephone</b> (314) 773-3408	Alzheimer's Unit	lo
SAINT LOUIS	MO 63118-3111	Level of Care: ALF	Bed Capacity	37
Mailing Address 3300 TEXAS AVE		County SAINT LOUIS CITY	DMH Licensed Y	es
SAINT LOUIS	MO 63118-3111	Region 7	Facility Number 0018	35
SILVERADO LEE'S SUMMIT		T. I. I. (016) 201 1640	A11 '	
3101 SW 3RD STREET	MO (4091 40/0	Telephone (816) 321-1648	Alzheimer's Unit Yo	
LEE'S SUMMIT	MO 64081-4060	Level of Care: ALF**		54
Mailing Address 3101 SW 3RD STREI		County JACKSON		No
LEE'S SUMMIT	MO 64081-4060	Region 3	Facility Number 3107	/ /
SILVERSTONE PLACE				
2735 EAGLESON DR		<b>Telephone</b> (573) 426-6200	Alzheimer's Unit	Ю
ROLLA	MO 65401-8384	Level of Care: SNF		10
Mailing Address 2735 EAGLESON DR		County PHELPS		No
ROLLA	MO 65401-8384	Region 6 Medicare/Medicaid	Facility Number 2935	
		o		-
SKYLINE ASSISTED LIVING LLC				
100 HARD ROCK RD		<b>Telephone</b> (573) 323-2108	Alzheimer's Unit	lo
VAN BUREN	MO 63965-7259	Level of Care: ALF**	Bed Capacity 2	26
Mailing Address PO BOX 780		County CARTER	DMH Licensed Y	es
VAN BUREN	MO 63965-0780	Region 2	Facility Number 2994	17

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are recorded to a				
SMILEY MANOR LLC		<b>T. 1</b> (24.1) 222 4242		
5415 THEKLA AVE		<b>Telephone</b> (314) 932-1360	Alzheimer's Unit	No
SAINT LOUIS	MO 63120-2513	Level of Care: RCF	Bed Capacity	20
Mailing Address 5415 THEKLA AVE	NO 20100 0710	County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS	MO 63120-2513	Region 7	Facility Number	04078
SOUTH COUNTY NURSING HOME,	INC			
1101 WEST OUTER 21 RD		<b>Telephone</b> (636) 296-5455	Alzheimer's Unit	No
ARNOLD	MO 63010-4644	Level of Care: SNF	Bed Capacity	153
Mailing Address 1101 WEST OUTER 2	21 RD	County JEFFERSON	DMH Licensed	No
ARNOLD	MO 63010-4644	Region 2 Medicare/Medicaid	Facility Number	03650
SOUTH HAMPTON PLACE		T. 1. 1. (570) 074 0 574		
4700 BRANDON WOODS		<b>Telephone</b> (573) 874-3674	Alzheimer's Unit	No
COLUMBIA	MO 65203-7169	Level of Care: SNF	Bed Capacity	100
Mailing Address 4700 BRANDON WO		County BOONE	DMH Licensed	No
COLUMBIA	MO 65203-7169	Region 6 Medicare/Medicaid	Facility Number	19799
SOUTH HAVEN RESIDENTIAL CAR	RE CENTER, LLC			
10462 AIRPORT RD		<b>Telephone</b> (573) 438-4150	Alzheimer's Unit	No
MINERAL POINT	MO 63660-9325	Level of Care: RCF*	<b>Bed Capacity</b>	20
Mailing Address 10462 AIRPORT RD		County WASHINGTON	DMH Licensed	Yes
MINERAL POINT	MO 63660-9325	Region 2	Facility Number	10529
SOUTH POINTE - ASSISTED LIVING	C DV AMEDICADE			
5125 OLD HWY 100	G D I AMERICARE	<b>Telephone</b> (636) 239-0670	Alzheimer's Unit	Yes
WASHINGTON	MO 63090-3855	Level of Care: ALF**	Bed Capacity	72
Mailing Address 5125 OLD HWY 100	WO 03040-3633	County FRANKLIN	DMH Licensed	No
WASHINGTON	MO 63090-3855	Region 6	Facility Number	13735
WASHINGTON	WO 03090-3633	Kegion 0	racinty Number	13/33
SOUTH VIEW HEALTH CARE, LLC	:			
951 CREAMERY ROAD		<b>Telephone</b> (417) 255-9322	Alzheimer's Unit	No
WEST PLAINS	MO 65775-6052	Level of Care: RCF*	Bed Capacity	32
Mailing Address PO BOX 88		County HOWELL	DMH Licensed	Yes
WEST PLAINS	MO 65775-0088	Region 2	Facility Number	23567
SOUTHAVEN				
612 SOUTH BYPASS EAST		<b>Telephone</b> (573) 888-9213	Alzheimer's Unit	No
KENNETT	MO 63857-3240	Level of Care: RCF*	Bed Capacity	36
Mailing Address 612 SOUTH BYPASS	EAST	County DUNKLIN	DMH Licensed	No
KENNETT	MO 63857-3240	Region 2	Facility Number	24336
SOUTHBROOK NURSING CENTER				
1101 HAZEL LANE		<b>Telephone</b> (573) 756-6658	Alzheimer's Unit	No
FARMINGTON	MO 63640-1920	Level of Care: SNF	Bed Capacity	104
Mailing Address 1101 HAZEL LANE		County SAINT FRANCOIS	DMH Licensed	No

Medicare/Medicaid

**Facility Number** 

02577

MO 63640-1920

FARMINGTON

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SOUTHGATE LIVING CENTER 500 TRUMAN BLVD		Tolonhous (572) 222 5150	Alabaiman'a Unit No
CARUTHERSVILLE	MO 63830-1261	Telephone (573) 333-5150 Level of Care: SNF	Alzheimer's Unit No Bed Capacity 94
Mailing Address 500 TRUMAN BLVD		County PEMISCOT	DMH Licensed No
CARUTHERSVILLE	MO 63830-1261	Region 2 Medicare/Medicaid	Facility Number 01081
CARC THERS VELLE	110 03030 1201	Region 2 Medical Confederatu	racinty raniber 01001
SOUTHVIEW ASSISTED LIVING			
9916 REAVIS ROAD		<b>Telephone</b> (314) 544-4440	Alzheimer's Unit Yes
AFFTON	MO 63123-5314	Level of Care: ALF**	Bed Capacity 116
Mailing Address 9916 REAVIS RD		County SAINT LOUIS COUNTY	DMH Licensed No
AFFTON	MO 63123-5314	Region 7	Facility Number 28446
CDECIAL EODOE FAMILY MINIST	DIEC		
SPECIAL FORCE FAMILY MINIST 428 SOUTH HARRISON ST	RIES	<b>Telephone</b> (417) 725-7917	Alzheimer's Unit No
NIXA	MO 65714-7809	Level of Care: RCF	Bed Capacity 12
Mailing Address PO BOX 882	WO 03714-7007	County CHRISTIAN	DMH Licensed Yes
NIXA	MO 65714-0882	Region 1	Facility Number 18764
T.M.M.T	110 03711 0002	Region 1	Tuenty Humber 10/04
SPENCER PLACE - ASSISTED LIVI	NG BY AMERICARE		
265 SPENCER RD		<b>Telephone</b> (636) 441-6662	Alzheimer's Unit No
SAINT PETERS	MO 63376-2430	Level of Care: ALF**	<b>Bed Capacity</b> 74
Mailing Address 265 SPENCER RD		County SAINT CHARLES	<b>DMH Licensed</b> No
SAINT PETERS	MO 63376-2430	Region 5	Facility Number 13294
SPRING MANOR			
3610 PALM ST		<b>Telephone</b> (314) 533-3111	Alzheimer's Unit No
SAINT LOUIS	MO 63107-2505	Level of Care: ALF**	<b>Bed Capacity</b> 94
Mailing Address 3610 PALM ST		County SAINT LOUIS CITY	DMH Licensed Yes
SAINT LOUIS	MO 63107-2505	Region 7	Facility Number 28552
SPRING RIDGE - ASSISTED LIVING	C RV AMERICARE		
2828 SOUTH MEADOWBROOK	S D I AMERICANE	<b>Telephone</b> (417) 889-7100	Alzheimer's Unit No
SPRINGFIELD	MO 65807-5925	Level of Care: ALF**	Bed Capacity 44
Mailing Address 2828 SOUTH MEAD	OWBROOK	County GREENE	DMH Licensed No
SPRINGFIELD	MO 65807-5925	Region 1	Facility Number 19713
CDDING DIVED CHDICTIAN VITA	CE INC		
SPRING RIVER CHRISTIAN VILLA 201 S NORTHPARK LN	IGE, INC	<b>Telephone</b> (417) 623-4313	Alzheimer's Unit No
JOPLIN	MO 64801-8426	Level of Care: ALF**	Bed Capacity 93
Mailing Address 201 S NORTHPARK		County JASPER	DMH Licensed No
JOPLIN	MO 64801-8426	Region 1	Facility Number 14251
55. Dit.	01001 0720	region .	_ nemey 1:00000 14231
SPRING VALLEY ASSISTED LIVIN	G		
2915 SOUTH FREMONT AVE		<b>Telephone</b> (417) 883-4022	Alzheimer's Unit No
SPRINGFIELD	MO 65804-3608	Level of Care: ALF	Bed Capacity 40
Mailing Address 2915 SOUTH FREMO		County GREENE	DMH Licensed No
SPRINGFIELD	MO 65804-3608	Region 1	Facility Number 00144

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SPRING VALLEY HEALTH & REH	ABILITATION CENTER		
2915 SOUTH FREMONT AVE		<b>Telephone</b> (417) 883-4022	Alzheimer's Unit Yes
SPRINGFIELD	MO 65804-3608	Level of Care: SNF	<b>Bed Capacity</b> 194
Mailing Address 2915 SOUTH FREMO		County GREENE	<b>DMH Licensed</b> No
SPRINGFIELD	MO 65804-3608	Region 1 Medicare/Medicaid	Facility Number 00144
SPRINGFIELD REHABILITATION	& HEALTH CARE CENTER		
2800 S FORT AVE		<b>Telephone</b> (417) 882-0035	Alzheimer's Unit No
SPRINGFIELD	MO 65807-3480	Level of Care: SNF	<b>Bed Capacity</b> 146
Mailing Address PO BOX 3438 GS		County GREENE	DMH Licensed No
SPRINGFIELD	MO 65808-3438	Region 1 Medicare/Medicaid	Facility Number 07460
SPRINGFIELD SKILLED CARE CE	NTFR		
2401 W GRAND ST	HIER	<b>Telephone</b> (417) 864-4545	Alzheimer's Unit No
SPRINGFIELD	MO 65802-4967	Level of Care: SNF	Bed Capacity 120
Mailing Address 2401 W GRAND ST	110 03002 4707	County GREENE	DMH Licensed No
SPRINGFIELD	MO 65802-4967	Region 1 Medicare/Medicaid	Facility Number 09756
SI KIIVOI ILLD	WO 03002-4707	Region 1 Wedicare/Medicard	racinty Number 09/30
SPRINGFIELD VILLA			
1100 EAST MONTCLAIR		<b>Telephone</b> (417) 820-8500	Alzheimer's Unit Yes
SPRINGFIELD	MO 65807-5076	Level of Care: SNF	<b>Bed Capacity</b> 146
Mailing Address 1100 EAST MONTCI	LAIR	County GREENE	<b>DMH Licensed</b> No
SPRINGFIELD	MO 65807-5076	Region 1 Medicare/Medicaid	Facility Number 05280
SPRINGHOUSE VILLAGE EAST, L	LC		
3877 EAST FARM ROAD 132		<b>Telephone</b> (417) 877-1717	Alzheimer's Unit Yes
SPRINGFIELD	MO 65802-	Level of Care: ALF**	Bed Capacity 100
Mailing Address 3877 EAST FARM R	OAD 132	County GREENE	DMH Licensed No
SPRINGFIELD	MO 65802-	Region 1	Facility Number 32469
SSTAR LLC			
125 ANNA AVE, #18		<b>Telephone</b> (636) 462-6979	Alzheimer's Unit No
TROY	MO 63379-2402	Level of Care: RCF	Bed Capacity 20
Mailing Address 125 ANNA AVE, #18	<b>.</b>	County LINCOLN	DMH Licensed Yes
TROY	MO 63379-2402	Region 5	Facility Number 16992
ST AGNES HOME			
10341 MANCHESTER RD		<b>Telephone</b> (314) 965-7616	Alzheimer's Unit No
KIRKWOOD	MO 63122-1520	Level of Care: ICF	
Mailing Address 10341 MANCHESTE KIRKWOOD	MO 63122-1520		
KIKKWOOD	WIO 03122-1320	Region 7	Facility Number 07481
ST ANDREW'S ASSISTED LIVING	OF BRIDGETON		
11325 ST CHARLES ROCK RD		<b>Telephone</b> (314) 209-1177	Alzheimer's Unit No
BRIDGETON	MO 63044-2722	Level of Care: ALF**	<b>Bed Capacity</b> 35
Mailing Address 11325 ST CHARLES		County SAINT LOUIS COUNTY	<b>DMH Licensed</b> No
BRIDGETON	MO 63044-2722	Region 7	Facility Number 22810

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	_		
ST ANDREW'S AT FRANCIS PLACE			
400 SUMMERVILLE BLVD	MO (0007 004 )	<b>Telephone</b> (636) 938-5151	Alzheimer's Unit No
EUREKA	MO 63025-2316	Level of Care: SNF	Bed Capacity 106
Mailing Address 400 SUMMERVILLE		County SAINT LOUIS COUNTY	DMH Licensed No
EUREKA	MO 63025-2316	Region 7 Medicare/Medicaid	Facility Number 06430
OT AND DEWIG AT NEW EX OPENOR	,		
ST ANDREW'S AT NEW FLORENCE	S	T. L. L. (572) 415 0222	AT TO THE STATE OF
515 PICNIC ST NEW FLORENCE	MO (22(2,222)	<b>Telephone</b> (573) 415-9333	Alzheimer's Unit No Bed Capacity 87
	MO 63363-2223	Level of Care: SNF County MONTGOMERY	
Mailing Address 515 PICNIC ST NEW FLORENCE	MO 63363-2223	·	
NEW FLORENCE	WIO 03303-2223	Region 6 Medicare/Medicaid	Facility Number 05723
ST ANDREW'S AT NEW FLORENCE	ē		
515 PICNIC ST		<b>Telephone</b> (573) 415-9333	Alzheimer's Unit No
NEW FLORENCE	MO 63363-2223	Level of Care: RCF*	<b>Bed Capacity</b> 33
Mailing Address 515 PICNIC ST		County MONTGOMERY	DMH Licensed No
NEW FLORENCE	MO 63363-2223	Region 6	Facility Number 05723
ST ANTHONY'S			
1010 EAST 68TH STREET		<b>Telephone</b> (816) 846-0870	Alzheimer's Unit Yes
KANSAS CITY	MO 64131-1311	Level of Care: ALF**	Bed Capacity 81
Mailing Address 1010 EAST 68TH STR	REET	County JACKSON	<b>DMH Licensed</b> No
KANSAS CITY	MO 64131-1311	Region 3	Facility Number 32075
ST CLAIR NURSING CENTER			
1035 PLAZA COURT NORTH		<b>Telephone</b> (636) 629-2100	Alzheimer's Unit No
SAINT CLAIR	MO 63077-1129	Level of Care: SNF	<b>Bed Capacity</b> 79
Mailing Address 1035 PLAZA CT NOR	TH	County FRANKLIN	<b>DMH Licensed</b> No
SAINT CLAIR	MO 63077-1129	Region 6 Medicare/Medicaid	Facility Number 13744
CT ELIZADETH CADE CENTED			
ST ELIZABETH CARE CENTER 649 SOUTH WALNUT ST		<b>Telephone</b> (573) 493-2215	Alzheimer's Unit No
SAINT ELIZABETH	MO 65075-2440	Level of Care: SNF	Bed Capacity 63
Mailing Address 649 SOUTH WALNUT		County MILLER	DMH Licensed No
SAINT ELIZABETH	MO 65075-2440	Region 6 Medicare/Medicaid	Facility Number 07523
	2110	region o medicare/medicard	1 401109 1 14111001 0 7525
ST ELIZABETH HALL			
325 NORTH NEWSTEAD AVE		<b>Telephone</b> (314) 652-9525	Alzheimer's Unit No
SAINT LOUIS	MO 63108-2707	Level of Care: ALF**	Bed Capacity 50
Mailing Address 325 N NEWSTEAD A	AVE	County SAINT LOUIS CITY	DMH Licensed Yes
SAINT LOUIS	MO 63108-2707	Region 7	Facility Number 07516
ST FRANCIS PARK - ASSISTED LIV	ING BY AMERICARE	T-lh (572) 000 1100	Alabatananta Tiart
1806 SAINT FRANCIS ST	MO (2057 1500	<b>Telephone</b> (573) 888-1188	Alzheimer's Unit No
KENNETT	MO 63857-1568	Level of Care: ALF**	Bed Capacity 50
M-11: Add DO DOV 600			- ·
Mailing Address PO BOX 629 KENNETT	MO 63857-0629	County DUNKLIN Region 2	DMH Licensed No Facility Number 18903

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ST FRANCOIS MANOR				
1180 OLD JACKSON RD		<b>Telephone</b> (573) 760-1700	Alzheimer's Unit	No
FARMINGTON	MO 63640-3428	Level of Care: RCF	Bed Capacity	11
Mailing Address 1180 OLD JACKSON	I RD	County SAINT FRANCOIS	DMH Licensed	Yes
FARMINGTON	MO 63640-3428	Region 2	Facility Number	21512
ST FRANCOIS MANOR				
1180 OLD JACKSON RD		T-1 (572) 760 1700	A 1-1: T.T:4	No
	MO (2640-2420	<b>Telephone</b> (573) 760-1700	Alzheimer's Unit	No
FARMINGTON	MO 63640-3428	Level of Care: SNF	Bed Capacity	118
Mailing Address 1180 OLD JACKSON		County SAINT FRANCOIS	DMH Licensed	No
FARMINGTON	MO 63640-3428	Region 2 Medicare/Medicaid	Facility Number	21512
ST FRANCOIS MANOR		m. 1. (550) 550 4500		
1180 OLD JACKSON RD		<b>Telephone</b> (573) 760-1700	Alzheimer's Unit	No
FARMINGTON	MO 63640-3428	Level of Care: RCF*	Bed Capacity	29
Mailing Address 1180 OLD JACKSON		County SAINT FRANCOIS	DMH Licensed	Yes
FARMINGTON	MO 63640-3428	Region 2	Facility Number	21512
ST GENEVIEVE NURSING				
1010 STE GENEVIEVE DR		<b>Telephone</b> (573) 883-5725	Alzheimer's Unit	No
SAINTE GENEVIEVE	MO 63670-1447	Level of Care: SNF	Bed Capacity	90
Mailing Address PO BOX 426		County SAINTE GENEVIEVE	DMH Licensed	No
SAINTE GENEVIEVE	MO 63670-0426	Region 2 Medicare/Medicaid	Facility Number	03254
am 111 and 1 1111 a				
ST JAMES LIVING CENTER		T. I. I. (272) 265 0001		17
415 SIDNEY ST	MO (5550 1070	<b>Telephone</b> (573) 265-8921	Alzheimer's Unit	Yes
415 SIDNEY ST SAINT JAMES	MO 65559-1070	Level of Care: SNF	Bed Capacity	90
415 SIDNEY ST SAINT JAMES <b>Mailing Address</b> PO BOX 69		Level of Care: SNF County PHELPS	Bed Capacity DMH Licensed	90 No
415 SIDNEY ST SAINT JAMES	MO 65559-1070 MO 65559-0069	Level of Care: SNF	Bed Capacity	90
415 SIDNEY ST SAINT JAMES <b>Mailing Address</b> PO BOX 69 SAINT JAMES		Level of Care: SNF County PHELPS	Bed Capacity DMH Licensed	90 No
415 SIDNEY ST SAINT JAMES Mailing Address PO BOX 69 SAINT JAMES ST JOE MANOR		Level of Care: SNF County PHELPS Region 6 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number	90 No 05238
415 SIDNEY ST SAINT JAMES Mailing Address PO BOX 69 SAINT JAMES  ST JOE MANOR 10 LAKE DR	MO 65559-0069	Level of Care: SNF County PHELPS Region 6 Medicare/Medicaid  Telephone (573) 358-2800	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	90 No 05238 No
415 SIDNEY ST SAINT JAMES Mailing Address PO BOX 69 SAINT JAMES  ST JOE MANOR 10 LAKE DR BONNE TERRE		Level of Care: SNF County PHELPS Region 6 Medicare/Medicaid  Telephone (573) 358-2800 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	90 No 05238 No 36
415 SIDNEY ST SAINT JAMES Mailing Address PO BOX 69 SAINT JAMES  ST JOE MANOR 10 LAKE DR BONNE TERRE Mailing Address 10 LAKE DR	MO 65559-0069 MO 63628-1820	Level of Care: SNF County PHELPS Region 6 Medicare/Medicaid  Telephone (573) 358-2800 Level of Care: ALF** County SAINT FRANCOIS	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	90 No 05238 No 36 No
415 SIDNEY ST SAINT JAMES Mailing Address PO BOX 69 SAINT JAMES  ST JOE MANOR 10 LAKE DR BONNE TERRE	MO 65559-0069	Level of Care: SNF County PHELPS Region 6 Medicare/Medicaid  Telephone (573) 358-2800 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	90 No 05238 No 36
415 SIDNEY ST SAINT JAMES Mailing Address PO BOX 69 SAINT JAMES  ST JOE MANOR 10 LAKE DR BONNE TERRE Mailing Address 10 LAKE DR	MO 65559-0069 MO 63628-1820	Level of Care: SNF County PHELPS Region 6 Medicare/Medicaid  Telephone (573) 358-2800 Level of Care: ALF** County SAINT FRANCOIS	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	90 No 05238 No 36 No
415 SIDNEY ST SAINT JAMES Mailing Address PO BOX 69 SAINT JAMES  ST JOE MANOR 10 LAKE DR BONNE TERRE Mailing Address 10 LAKE DR BONNE TERRE ST JOE MANOR	MO 65559-0069 MO 63628-1820	Level of Care: SNF County PHELPS Region 6 Medicare/Medicaid  Telephone (573) 358-2800 Level of Care: ALF** County SAINT FRANCOIS Region 2	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	90 No 05238 No 36 No 22664
415 SIDNEY ST SAINT JAMES Mailing Address PO BOX 69 SAINT JAMES  ST JOE MANOR 10 LAKE DR BONNE TERRE Mailing Address 10 LAKE DR BONNE TERRE ST JOE MANOR 10 LAKE DR	MO 63628-1820 MO 63628-1820	Level of Care: SNF County PHELPS Region 6 Medicare/Medicaid  Telephone (573) 358-2800 Level of Care: ALF** County SAINT FRANCOIS Region 2  Telephone (573) 358-2800	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	90 No 05238 No 36 No 22664
415 SIDNEY ST SAINT JAMES Mailing Address PO BOX 69 SAINT JAMES  ST JOE MANOR 10 LAKE DR BONNE TERRE Mailing Address 10 LAKE DR BONNE TERRE  ST JOE MANOR 10 LAKE DR 10 LAKE DR BONNE TERRE	MO 65559-0069 MO 63628-1820	Level of Care: SNF County PHELPS Region 6 Medicare/Medicaid  Telephone (573) 358-2800 Level of Care: ALF** County SAINT FRANCOIS Region 2  Telephone (573) 358-2800 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	90 No 05238 No 36 No 22664 Yes 145
415 SIDNEY ST SAINT JAMES Mailing Address PO BOX 69 SAINT JAMES  ST JOE MANOR 10 LAKE DR BONNE TERRE Mailing Address 10 LAKE DR BONNE TERRE  ST JOE MANOR 10 LAKE DR BONNE TERRE Mailing Address 10 LAKE DR	MO 63628-1820 MO 63628-1820 MO 63628-1820	Level of Care: SNF County PHELPS Region 6 Medicare/Medicaid  Telephone (573) 358-2800 Level of Care: ALF** County SAINT FRANCOIS Region 2  Telephone (573) 358-2800 Level of Care: SNF County SAINT FRANCOIS	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	90 No 05238 No 36 No 22664 Yes 145 No
415 SIDNEY ST SAINT JAMES Mailing Address PO BOX 69 SAINT JAMES  ST JOE MANOR 10 LAKE DR BONNE TERRE Mailing Address 10 LAKE DR BONNE TERRE  ST JOE MANOR 10 LAKE DR 10 LAKE DR BONNE TERRE	MO 63628-1820 MO 63628-1820	Level of Care: SNF County PHELPS Region 6 Medicare/Medicaid  Telephone (573) 358-2800 Level of Care: ALF** County SAINT FRANCOIS Region 2  Telephone (573) 358-2800 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	90 No 05238 No 36 No 22664 Yes 145
415 SIDNEY ST SAINT JAMES Mailing Address PO BOX 69 SAINT JAMES  ST JOE MANOR 10 LAKE DR BONNE TERRE Mailing Address 10 LAKE DR BONNE TERRE  ST JOE MANOR 10 LAKE DR BONNE TERRE Mailing Address 10 LAKE DR	MO 63628-1820 MO 63628-1820 MO 63628-1820	Level of Care: SNF County PHELPS Region 6 Medicare/Medicaid  Telephone (573) 358-2800 Level of Care: ALF** County SAINT FRANCOIS Region 2  Telephone (573) 358-2800 Level of Care: SNF County SAINT FRANCOIS	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	90 No 05238 No 36 No 22664 Yes 145 No
415 SIDNEY ST SAINT JAMES Mailing Address PO BOX 69 SAINT JAMES  ST JOE MANOR 10 LAKE DR BONNE TERRE Mailing Address 10 LAKE DR BONNE TERRE  ST JOE MANOR 10 LAKE DR BONNE TERRE Mailing Address 10 LAKE DR BONNE TERRE Mailing Address 10 LAKE DR BONNE TERRE	MO 63628-1820 MO 63628-1820 MO 63628-1820	Level of Care: SNF County PHELPS Region 6 Medicare/Medicaid  Telephone (573) 358-2800 Level of Care: ALF** County SAINT FRANCOIS Region 2  Telephone (573) 358-2800 Level of Care: SNF County SAINT FRANCOIS	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	90 No 05238 No 36 No 22664 Yes 145 No
415 SIDNEY ST SAINT JAMES Mailing Address PO BOX 69 SAINT JAMES  ST JOE MANOR 10 LAKE DR BONNE TERRE Mailing Address 10 LAKE DR BONNE TERRE  ST JOE MANOR 10 LAKE DR BONNE TERRE Mailing Address 10 LAKE DR BONNE TERRE Mailing Address 10 LAKE DR BONNE TERRE Mailing Address 10 LAKE DR BONNE TERRE	MO 63628-1820 MO 63628-1820 MO 63628-1820	Level of Care: SNF County PHELPS Region 6 Medicare/Medicaid  Telephone (573) 358-2800 Level of Care: ALF** County SAINT FRANCOIS Region 2  Telephone (573) 358-2800 Level of Care: SNF County SAINT FRANCOIS Region 2 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	90 No 05238 No 36 No 22664 Yes 145 No 22664
415 SIDNEY ST SAINT JAMES Mailing Address PO BOX 69 SAINT JAMES  ST JOE MANOR 10 LAKE DR BONNE TERRE Mailing Address 10 LAKE DR BONNE TERRE  ST JOE MANOR 10 LAKE DR BONNE TERRE Mailing Address 10 LAKE DR BONNE TERRE Mailing Address 10 LAKE DR BONNE TERRE Mailing Address 10 LAKE DR BONNE TERRE  ST JOE MANOR 10 LAKE DR BONNE TERRE	MO 63628-1820 MO 63628-1820 MO 63628-1820 MO 63628-1820	Level of Care: SNF County PHELPS Region 6 Medicare/Medicaid  Telephone (573) 358-2800 Level of Care: ALF** County SAINT FRANCOIS Region 2  Telephone (573) 358-2800 Level of Care: SNF County SAINT FRANCOIS Region 2 Medicare/Medicaid  Telephone (573) 358-2800 Level of Care: ALF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	90 No 05238 No 36 No 22664 Yes 145 No 22664
415 SIDNEY ST SAINT JAMES Mailing Address PO BOX 69 SAINT JAMES  ST JOE MANOR 10 LAKE DR BONNE TERRE Mailing Address 10 LAKE DR BONNE TERRE  ST JOE MANOR 10 LAKE DR BONNE TERRE Mailing Address 10 LAKE DR BONNE TERRE Mailing Address 10 LAKE DR BONNE TERRE Mailing Address 10 LAKE DR BONNE TERRE  ST JOE MANOR 10 LAKE DR	MO 63628-1820 MO 63628-1820 MO 63628-1820 MO 63628-1820	Level of Care: SNF County PHELPS Region 6 Medicare/Medicaid  Telephone (573) 358-2800 Level of Care: ALF** County SAINT FRANCOIS Region 2  Telephone (573) 358-2800 Level of Care: SNF County SAINT FRANCOIS Region 2 Medicare/Medicaid  Telephone (573) 358-2800	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	90 No 05238 No 36 No 22664 Yes 145 No 22664

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ST JOHNS PLACE				
3333 BROWN ROAD		<b>Telephone</b> (314) 426-2211	Alzheimer's Unit	No
SAINT LOUIS	MO 63114-4327	Level of Care: SNF	Bed Capacity	94
Mailing Address 3333 BROWN RD		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63114-4327	Region 7 Medicare/Medicaid	Facility Number	18454
ST JOSEPH CHATEAU				
811 NORTH 9TH ST		<b>Telephone</b> (816) 722-9093	Alzheimer's Unit	No
SAINT JOSEPH	MO 64501-1651	Level of Care: SNF	Bed Capacity	69
Mailing Address 811 NORTH 9TH ST		County BUCHANAN	DMH Licensed	No
SAINT JOSEPH	MO 64508-1651	Region 4 Medicare/Medicaid	Facility Number	07532
ST JOSEPH MANOR HEALTH & RE	EHABILITATION	T. I. I. (016) (75 1600		3.7
1317 NORTH 36TH ST	NO. 64506 2250	<b>Telephone</b> (816) 676-1630	Alzheimer's Unit	No
SAINT JOSEPH	MO 64506-2359	Level of Care: SNF	Bed Capacity	110
Mailing Address 1317 NORTH 36TH S		County BUCHANAN	DMH Licensed	No
SAINT JOSEPH	MO 64506-2359	Region 4 Medicare/Medicaid	Facility Number	00526
ST LOUIS ALTENHEIM				
5408 SOUTH BROADWAY		<b>Telephone</b> (314) 353-7225	Alzheimer's Unit	Yes
SAINT LOUIS	MO 63111-2023	Level of Care: ALF**	<b>Bed Capacity</b>	23
Mailing Address 5408 SOUTH BROAD	OWAY	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS	MO 63111-2023	Region 7	Facility Number	07585
ST LOUIS ALTENHEIM				
5408 SOUTH BROADWAY		<b>Telephone</b> (314) 353-7225	Alzheimer's Unit	No
SAINT LOUIS	MO 63111-2023	Level of Care: SNF	<b>Bed Capacity</b>	48
Mailing Address 5408 SOUTH BROAD	DWAY	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS	MO 63111-2023	Region 7 Medicaid	Facility Number	07585
ST LOUIS HILLS ASSISTED LIVING	C AND MEMORY CARE			
6543 CHIPPEWA ST	THE MEMORY CHEE	<b>Telephone</b> (314) 647-6600	Alzheimer's Unit	Yes
SAINT LOUIS	MO 63109-4100	Level of Care: ALF**	Bed Capacity	181
Mailing Address 6543 CHIPPEWA ST		County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS	MO 63109-4100	Region 7	Facility Number	07594
ST LUKE'S CARE CENTER, INC				
		Talanhana (417) 259 0094	Alahoimon'a Unit	No
1220 EAST FAIRVIEW AVE CARTHAGE	MO 64836-3122	Telephone (417) 358-9084 Level of Care: ALF**	Alzheimer's Unit Bed Capacity	No 41
Mailing Address 1220 EAST FAIRVIE		County JASPER	DMH Licensed	No
CARTHAGE	MO 64836-3122	Region 1	Facility Number	07606
ST LUKE'S NURSING AND REHABI	LITATION			
1220 EAST FAIRVIEW AVE		<b>Telephone</b> (417) 358-9084	Alzheimer's Unit	Yes
CARTHAGE	MO 64836-3122	Level of Care: SNF	Bed Capacity	95
Mailing Address 1220 EAST FAIRVIE	WAVE	County JASPER	DMH Licensed	No

Medicare/Medicaid

**Facility Number** 

07606

MO 64836-3122

CARTHAGE

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ST PETERS POST ACUTE	T. 1 (22) 222 T. 222	
5400 EXECUTIVE CENTRE PKWY	Telephone (636) 922-7600 Alzheimer's Unit	Yes
SAINT PETERS MO 63376-2594	* "	130
Mailing Address 5400 EXECUTIVE CENTRE PKWY	County SAINT CHARLES DMH Licensed	No
SAINT PETERS MO 63376-2594	Region 5 Medicare/Medicaid Facility Number	26014
ST PETERS POST ACUTE		
5400 EXECUTIVE CENTRE PKWY	Telephone (636) 922-7600 Alzheimer's Unit	No
SAINT PETERS MO 63376-2594		62
Mailing Address 5400 EXECUTIVE CENTRE PKWY	County SAINT CHARLES DMH Licensed	No
SAINT PETERS MO 63376-2594	·	
SAINT LETEKS WIO 03370-2394	Region 5 Facility Number	26014
ST PETERS REHAB AND HEALTHCARE CENTER		
230 SPENCER RD	Telephone (636) 441-2750 Alzheimer's Unit	No
SAINT PETERS MO 63376-2425	Level of Care: SNF Bed Capacity	96
Mailing Address 230 SPENCER RD	County SAINT CHARLES DMH Licensed	No
SAINT PETERS MO 63376-2425	Region 5 Medicare/Medicaid Facility Number	07613
ST SOPHIA HEALTH & REHABILITATION CENTER		
936 CHARBONIER RD	Telephone (314) 831-4800 Alzheimer's Unit	No
FLORISSANT MO 63031-5220		240
Mailing Address 936 CHARBONIER RD	County SAINT LOUIS COUNTY DMH Licensed	No
FLORISSANT MO 63031-5220	Region 7 Medicare/Medicaid Facility Number	07631
STEELVILLE SENIOR LIVING		
311 NORTH SPRING ST	Telephone (573) 260-8850 Alzheimer's Unit	No
311 NORTH SPRING ST STEELVILLE MO 65565-5089	Telephone (573) 260-8850 Alzheimer's Unit Level of Care: SNF Bed Capacity	No 72
STEELVILLE MO 65565-5089	• • • • • • • • • • • • • • • • • • • •	
	Level of Care: SNF Bed Capacity County CRAWFORD DMH Licensed	72
STEELVILLE MO 65565-5089  Mailing Address 311 NORTH SPRING ST	Level of Care: SNF Bed Capacity County CRAWFORD DMH Licensed	72 No
STEELVILLE MO 65565-5089  Mailing Address 311 NORTH SPRING ST  STEELVILLE MO 65565-5089  STEELVILLE SENIOR LIVING	Level of Care: SNF Bed Capacity County CRAWFORD DMH Licensed Region 6 Medicare/Medicaid Facility Number	72 No 02860
STEELVILLE MO 65565-5089  Mailing Address 311 NORTH SPRING ST  STEELVILLE MO 65565-5089  STEELVILLE SENIOR LIVING 311 NORTH SPRING ST	Level of Care: SNF Bed Capacity County CRAWFORD DMH Licensed Region 6 Medicare/Medicaid Facility Number  Telephone (573) 260-8850 Alzheimer's Unit	72 No 02860 No
STEELVILLE MO 65565-5089  Mailing Address 311 NORTH SPRING ST  STEELVILLE SENIOR LIVING 311 NORTH SPRING ST  STEELVILLE MO 65565-5089	Level of Care: SNF Bed Capacity County CRAWFORD DMH Licensed Region 6 Medicare/Medicaid Facility Number  Telephone (573) 260-8850 Alzheimer's Unit Level of Care: ALF Bed Capacity	72 No 02860 No 21
STEELVILLE MO 65565-5089  Mailing Address 311 NORTH SPRING ST  STEELVILLE SENIOR LIVING 311 NORTH SPRING ST  STEELVILLE MO 65565-5089  Mailing Address 311 NORTH SPRING ST	Level of Care: SNF Bed Capacity County CRAWFORD DMH Licensed Region 6 Medicare/Medicaid Facility Number  Telephone (573) 260-8850 Alzheimer's Unit Level of Care: ALF Bed Capacity County CRAWFORD DMH Licensed	72 No 02860 No 21 No
STEELVILLE MO 65565-5089  Mailing Address 311 NORTH SPRING ST  STEELVILLE SENIOR LIVING 311 NORTH SPRING ST  STEELVILLE MO 65565-5089	Level of Care: SNF Bed Capacity County CRAWFORD DMH Licensed Region 6 Medicare/Medicaid Facility Number  Telephone (573) 260-8850 Alzheimer's Unit Level of Care: ALF Bed Capacity County CRAWFORD DMH Licensed	72 No 02860 No 21
STEELVILLE MO 65565-5089  Mailing Address 311 NORTH SPRING ST  STEELVILLE SENIOR LIVING 311 NORTH SPRING ST  STEELVILLE MO 65565-5089  Mailing Address 311 NORTH SPRING ST  STEELVILLE MO 65565-5089	Level of Care: SNF Bed Capacity County CRAWFORD DMH Licensed Region 6 Medicare/Medicaid Facility Number  Telephone (573) 260-8850 Alzheimer's Unit Level of Care: ALF Bed Capacity County CRAWFORD DMH Licensed	72 No 02860 No 21 No
STEELVILLE MO 65565-5089  Mailing Address 311 NORTH SPRING ST  STEELVILLE SENIOR LIVING 311 NORTH SPRING ST  STEELVILLE MO 65565-5089  Mailing Address 311 NORTH SPRING ST	Level of Care: SNF County CRAWFORD DMH Licensed Region 6 Medicare/Medicaid Facility Number  Telephone (573) 260-8850 Alzheimer's Unit Level of Care: ALF County CRAWFORD DMH Licensed Region 6 Facility Number	72 No 02860 No 21 No
STEELVILLE MO 65565-5089  Mailing Address 311 NORTH SPRING ST  STEELVILLE SENIOR LIVING 311 NORTH SPRING ST  STEELVILLE MO 65565-5089  Mailing Address 311 NORTH SPRING ST  STEELVILLE MO 65565-5089  Mailing Address 311 NORTH SPRING ST  STEELVILLE MO 65565-5089  STONEBRIDGE ADAMS STREET	Level of Care: SNF County CRAWFORD DMH Licensed Region 6 Medicare/Medicaid Facility Number  Telephone (573) 260-8850 Alzheimer's Unit Level of Care: ALF County CRAWFORD DMH Licensed Region 6 Facility Number  Telephone (573) 635-1320 Alzheimer's Unit	72 No 02860 No 21 No 02860
STEELVILLE MO 65565-5089  Mailing Address 311 NORTH SPRING ST  STEELVILLE SENIOR LIVING  311 NORTH SPRING ST  STEELVILLE MO 65565-5089  Mailing Address 311 NORTH SPRING ST  STEELVILLE MO 65565-5089  Mailing Address 311 NORTH SPRING ST  STEELVILLE MO 65565-5089  STONEBRIDGE ADAMS STREET  1024 ADAMS ST  JEFFERSON CITY MO 65101-3408	Level of Care: SNF County CRAWFORD DMH Licensed Region 6 Medicare/Medicaid Facility Number  Telephone (573) 260-8850 Alzheimer's Unit Level of Care: ALF County CRAWFORD DMH Licensed Region 6 Facility Number  Telephone (573) 635-1320 Alzheimer's Unit	72 No 02860 No 21 No 02860
STEELVILLE MO 65565-5089  Mailing Address 311 NORTH SPRING ST  STEELVILLE SENIOR LIVING  311 NORTH SPRING ST  STEELVILLE MO 65565-5089  Mailing Address 311 NORTH SPRING ST  STEELVILLE MO 65565-5089  Mailing Address 311 NORTH SPRING ST  STEELVILLE MO 65565-5089  STONEBRIDGE ADAMS STREET  1024 ADAMS ST	Level of Care: SNF County CRAWFORD DMH Licensed Region 6 Medicare/Medicaid Facility Number  Telephone (573) 260-8850 Alzheimer's Unit Level of Care: ALF County CRAWFORD DMH Licensed Region 6 Facility Number  Telephone (573) 635-1320 Alzheimer's Unit Level of Care: SNF Bed Capacity County COLE DMH Licensed	72 No 02860 No 21 No 02860
STEELVILLE MO 65565-5089  Mailing Address 311 NORTH SPRING ST  STEELVILLE SENIOR LIVING 311 NORTH SPRING ST  STEELVILLE MO 65565-5089  Mailing Address 311 NORTH SPRING ST  STEELVILLE MO 65565-5089  Mailing Address 311 NORTH SPRING ST  STEELVILLE MO 65565-5089  STONEBRIDGE ADAMS STREET  1024 ADAMS ST  JEFFERSON CITY MO 65101-3408  Mailing Address 1024 ADAMS ST	Level of Care: SNF County CRAWFORD DMH Licensed Region 6 Medicare/Medicaid Facility Number  Telephone (573) 260-8850 Alzheimer's Unit Level of Care: ALF County CRAWFORD DMH Licensed Region 6 Facility Number  Telephone (573) 635-1320 Alzheimer's Unit Level of Care: SNF Bed Capacity County COLE DMH Licensed	72 No 02860 No 21 No 02860 No 120 No
STEELVILLE MO 65565-5089  Mailing Address 311 NORTH SPRING ST  STEELVILLE SENIOR LIVING 311 NORTH SPRING ST  STEELVILLE MO 65565-5089  Mailing Address 311 NORTH SPRING ST  STEELVILLE MO 65565-5089  Mailing Address 311 NORTH SPRING ST  STEELVILLE MO 65565-5089  STONEBRIDGE ADAMS STREET  1024 ADAMS ST  JEFFERSON CITY MO 65101-3408  Mailing Address 1024 ADAMS ST  JEFFERSON CITY MO 65101-3408  STONEBRIDGE CHILLICOTHE	Level of Care: SNF County CRAWFORD Region 6 Medicare/Medicaid  Telephone (573) 260-8850 Level of Care: ALF County CRAWFORD DMH Licensed Region 6 Facility Number  Telephone (573) 635-1320 Region 6 Facility Number  Telephone (573) 635-1320 Alzheimer's Unit Level of Care: SNF Bed Capacity Number  Telephone (573) 635-1320 Alzheimer's Unit Level of Care: SNF Bed Capacity County COLE DMH Licensed Region 6 Medicare/Medicaid Facility Number	72 No 02860 No 21 No 02860 No 120 No 01339
STEELVILLE         MO         65565-5088           Mailing Address 311 NORTH SPRING ST         STEELVILLE         MO         65565-5089           STEELVILLE SENIOR LIVING           311 NORTH SPRING ST         TOREBULLE         MO         65565-5089           Mailing Address 311 NORTH SPRING ST         STEELVILLE         MO         65565-5089           STONEBRIDGE ADAMS STREET         1024 ADAMS ST         JEFFERSON CITY         MO         65101-3408           Mailing Address 1024 ADAMS ST         JEFFERSON CITY         MO         65101-3408           STONEBRIDGE CHILLICOTHE         2601 FAIR ST         TONEBRIDGE CHILLICOTHE         2601 FAIR ST	Level of Care: SNF County CRAWFORD DMH Licensed Region 6 Medicare/Medicaid Facility Number  Telephone (573) 260-8850 Alzheimer's Unit Level of Care: ALF County CRAWFORD DMH Licensed Region 6 Facility Number  Telephone (573) 635-1320 Alzheimer's Unit Level of Care: SNF Bed Capacity Number  Telephone (573) 635-1320 Alzheimer's Unit Level of Care: SNF Bed Capacity County COLE DMH Licensed Region 6 Medicare/Medicaid Facility Number	72 No 02860 No 21 No 02860 No 120 No 01339
STEELVILLE MO 65565-5089  Mailing Address 311 NORTH SPRING ST  STEELVILLE SENIOR LIVING 311 NORTH SPRING ST  STEELVILLE MO 65565-5089  Mailing Address 311 NORTH SPRING ST  STEELVILLE MO 65565-5089  Mailing Address 311 NORTH SPRING ST  STEELVILLE MO 65565-5089  STONEBRIDGE ADAMS STREET 1024 ADAMS ST  JEFFERSON CITY MO 65101-3408  Mailing Address 1024 ADAMS ST  JEFFERSON CITY MO 65101-3408  STONEBRIDGE CHILLICOTHE 2601 FAIR ST  CHILLICOTHE MO 64601-3525	Level of Care: SNF County CRAWFORD Region 6 Medicare/Medicaid Facility Number  Telephone (573) 260-8850 Alzheimer's Unit Level of Care: ALF County CRAWFORD Region 6 Facility Number  Telephone (573) 635-1320 Alzheimer's Unit Level of Care: SNF Bed Capacity County COLE County COLE Region 6 Medicare/Medicaid Facility Number  Telephone (660) 646-4123 Alzheimer's Unit Level of Care: SNF Bed Capacity County COLE Region 6 Medicare/Medicaid Facility Number	72 No 02860 No 21 No 02860 No 120 No 01339
STEELVILLE         MO         65565-5088           Mailing Address 311 NORTH SPRING ST         STEELVILLE         MO         65565-5089           STEELVILLE SENIOR LIVING           311 NORTH SPRING ST         TOREBULLE         MO         65565-5089           Mailing Address 311 NORTH SPRING ST         STEELVILLE         MO         65565-5089           STONEBRIDGE ADAMS STREET         1024 ADAMS ST         JEFFERSON CITY         MO         65101-3408           Mailing Address 1024 ADAMS ST         JEFFERSON CITY         MO         65101-3408           STONEBRIDGE CHILLICOTHE         2601 FAIR ST         TONEBRIDGE CHILLICOTHE         2601 FAIR ST	Level of Care: SNF County CRAWFORD Region 6 Medicare/Medicaid  Telephone (573) 260-8850 Level of Care: ALF County CRAWFORD Region 6 Facility Number  Telephone (573) 635-1320 Region 6 Facility Number  Telephone (573) 635-1320 Alzheimer's Unit Level of Care: SNF Bed Capacity County COLE DMH Licensed Region 6 Medicare/Medicaid Facility Number  Telephone (660) 646-4123 Alzheimer's Unit Level of Care: SNF Bed Capacity Number  Telephone (660) 646-4123 Alzheimer's Unit Level of Care: SNF Bed Capacity DMH Licensed	72 No 02860 No 21 No 02860 No 120 No 01339

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STONEBRIDGE CHILLICOTHE		T-1	Al-L-i
2601 FAIR ST CHILLICOTHE	MO 64601-3525	Telephone (660) 646-4123 Level of Care: ALF**	Alzheimer's Unit No Bed Capacity 40
Mailing Address 2601 FAIR ST	WO 04001-3323	County LIVINGSTON	DMH Licensed No
CHILLICOTHE	MO 64601-3525	Region 4	Facility Number 03833
CHELICOTTE	1110 04001-3323	Region 4	racinty Number 03833
STONEBRIDGE DESOTO			
1550 VILLAS DR		<b>Telephone</b> (636) 586-6559	Alzheimer's Unit No
DE SOTO	MO 63020-2586	Level of Care: ALF**	<b>Bed Capacity</b> 80
Mailing Address 1550 VILLAS DR		County JEFFERSON	DMH Licensed No
DE SOTO	MO 63020-2586	Region 2	Facility Number 13501
STONEBRIDGE DESOTO		m	
1550 VILLAS DR	110 (2000 250)	<b>Telephone</b> (636) 586-6559	Alzheimer's Unit No
DE SOTO	MO 63020-2586	Level of Care: SNF	Bed Capacity 56
Mailing Address 1550 VILLAS DR DE SOTO	MO 63020-2586	County JEFFERSON	DMH Licensed No
DESOIO	MO 03020-2380	Region 2 Medicare/Medicaid	Facility Number 13501
STONEBRIDGE FLORISSANT			
6768 NORTH HIGHWAY 67		<b>Telephone</b> (314) 741-9101	Alzheimer's Unit No
FLORISSANT	MO 63034-2742	Level of Care: SNF	Bed Capacity 120
Mailing Address 6768 NORTH HWY 6	57	County SAINT LOUIS COUNTY	<b>DMH Licensed</b> No
FLORISSANT	MO 63034-2742	Region 7 Medicare/Medicaid	Facility Number 14200
CTONERRIDGE HERMANN			
STONEBRIDGE HERMANN 1800 WEIN ST		<b>Telephone</b> (573) 486-3155	Alzheimer's Unit No
HERMANN	MO 65041-1601	Level of Care: SNF	Bed Capacity 118
Mailing Address PO BOX 468	WO 03041 1001	County GASCONADE	DMH Licensed No
HERMANN	MO 65041-0468	Region 6 Medicare/Medicaid	Facility Number 02690
STONEBRIDGE HERMANN			
1800 WEIN ST		<b>Telephone</b> (573) 486-3155	Alzheimer's Unit No
HERMANN	MO 65041-1601	Level of Care: ALF	Bed Capacity 18
Mailing Address PO BOX 468		County GASCONADE	DMH Licensed No
HERMANN	MO 65041-0468	Region 6	Facility Number 02690
STONEBRIDGE LAKE OZARK			
872 COLLEGE BLVD		<b>Telephone</b> (573) 302-0900	Alzheimer's Unit No
OSAGE BEACH	MO 65065-8408	Level of Care: ALF**	Bed Capacity 40
Mailing Address 872 COLLEGE BLVE	)	County MILLER	<b>DMH Licensed</b> No
OSAGE BEACH	MO 65065-8408	Region 6	Facility Number 20926
STONEBRIDGE LAKE OZARK			
872 COLLEGE BLVD		<b>Telephone</b> (573) 302-0900	Alzheimer's Unit No
OSAGE BEACH	MO 65065-8408	Level of Care: SNF	Bed Capacity 66
Mailing Address 872 COLLEGE BLVI		County MILLER	DMH Licensed No
OSAGE BEACH	MO 65065-8408	Region 6 Medicare/Medicaid	Facility Number 20926

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STONEBRIDGE MARBLE HILL				
702 HIGHWAY 34 WEST		<b>Telephone</b> (573) 238-2614	Alzheimer's Unit N	
MARBLE HILL	MO 63764-4301	Level of Care: SNF		98
Mailing Address 702 HWY 34 WEST	160	County BOLLINGER		10
MARBLE HILL	MO 63764-4301	Region 2 Medicare/Medicaid	Facility Number 1086	54
STONEBRIDGE MARYLAND HEIG	HTS			
2963 DODDRIDGE AVE		<b>Telephone</b> (314) 291-4557	Alzheimer's Unit N	lo.
MARYLAND HEIGHTS	MO 63043-1736	Level of Care: SNF	Bed Capacity 22	
Mailing Address 2963 DODDRIDGE A		County SAINT LOUIS COUNTY		lo.
MARYLAND HEIGHTS	MO 63043-1736	Region 7 Medicare/Medicaid	Facility Number 0085	
			•	
STONEBRIDGE OAK TREE				
3108 WEST TRUMAN BLVD		<b>Telephone</b> (573) 893-3063	<b>Alzheimer's Unit</b> N	Ю
JEFFERSON CITY	MO 65109-4918	Level of Care: ALF	Bed Capacity 8	30
Mailing Address 3108 WEST TRUMA	N BLVD	County COLE	<b>DMH Licensed</b> N	Ю
JEFFERSON CITY	MO 65109-4918	Region 6	Facility Number 1030	)()
STONEBRIDGE OAK TREE				
3108 WEST TRUMAN BLVD		<b>Telephone</b> (573) 893-3063		Ю
JEFFERSON CITY	MO 65109-4918	Level of Care: SNF		12
Mailing Address 3108 WEST TRUMA		County COLE		Ю
JEFFERSON CITY	MO 65109-4918	Region 6 Medicare/Medicaid	Facility Number 1030	)()
STONEBRIDGE OWENSVILLE				
1016 W HIGHWAY 28		<b>Telephone</b> (573) 437-6877	Alzheimer's Unit Ye	es
OWENSVILLE	MO 65066-1677	Level of Care: SNF	Bed Capacity 13	
Mailing Address PO BOX 593		County GASCONADE	• •	lo.
OWENSVILLE	MO 65066-0593	Region 6 Medicare/Medicaid	Facility Number 1905	51
STONEBRIDGE VILLA MARIE				
1030 EDMONDS ST	MO (5100 5212	<b>Telephone</b> (573) 635-3381	Alzheimer's Unit Ye	
JEFFERSON CITY	MO 65109-5213	Level of Care: SNF	Bed Capacity 12	
Mailing Address 1030 EDMONDS ST	MO (5100 5212	County COLE		No.
JEFFERSON CITY	MO 65109-5213	Region 6 Medicare/Medicaid	Facility Number 0828	52
STONEBRIDGE WESTPHALIA				
1899 HIGHWAY 63		<b>Telephone</b> (573) 455-2280	Alzheimer's Unit N	lo
WESTPHALIA	MO 65085-2215	Level of Care: SNF	Bed Capacity 6	54
Mailing Address 1899 HWY 63		County OSAGE	DMH Licensed N	lо
WESTPHALIA	MO 65085-2215	Region 6 Medicare/Medicaid	Facility Number 1865	53
STONEBRIDGE WESTPHALIA 1899 HIGHWAY 63		Tolonhone (572) 455 2290	Alzheimer's Unit	Ic
WESTPHALIA	MO 65085 2215	Telephone (573) 455-2280 Level of Care: RCF*		Ло 28
Mailing Address 1899 HWY 63	MO 65085-2215	County OSAGE		28 Vo
WESTPHALIA	MO 65085 2215	·		
WESTPHALIA	MO 65085-2215	Region 6	Facility Number 1865	13

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STONECREST HEALTHCARE			
2 HIGHWAY Y		<b>Telephone</b> (573) 244-3171	Alzheimer's Unit No
VIBURNUM	MO 65566-0707	Level of Care: SNF	<b>Bed Capacity</b> 60
Mailing Address PO BOX 707		County IRON	DMH Licensed No
VIBURNUM	MO 65566-0707	Region 2 Medicare/Medicaid	Facility Number 16689
STONEY RIDGE VILLAGE I LLC			
25023 BOTHWELL PARK RD		<b>Telephone</b> (660) 827-3993	Alzheimer's Unit No
SEDALIA	MO 65301-0084	Level of Care: RCF	Bed Capacity 81
Mailing Address 25023 BOTHWELL	PARK RD	County PETTIS	DMH Licensed No
SEDALIA	MO 65301-0084	Region 6	Facility Number 05035
STOVER'S RESIDENTIAL CARE F	ACILITY		
520 EAST 5TH ST		<b>Telephone</b> (660) 265-2079	Alzheimer's Unit No
MILAN	MO 63556-1222	Level of Care: RCF	Bed Capacity 20
Mailing Address 520 EAST 5TH ST	110 00000 1222	County SULLIVAN	DMH Licensed Yes
MILAN	MO 63556-1222	Region 5	Facility Number 07709
			•
STRAFFORD CARE CENTER			
505 WEST EVERGREEN		<b>Telephone</b> (417) 736-9332	Alzheimer's Unit Yes
STRAFFORD	MO 65757-8625	Level of Care: SNF	Bed Capacity 78
Mailing Address 505 WEST EVERGR		County GREENE	DMH Licensed No
STRAFFORD	MO 65757-8625	Region 1 Medicare/Medicaid	Facility Number 21285
STUART HOUSE, LLC THE			
117 S HICKMAN		<b>Telephone</b> (573) 682-3204	Alzheimer's Unit No
CENTRALIA	MO 65240-1316	Level of Care: ICF	<b>Bed Capacity</b> 27
Mailing Address 117 S HICKMAN		County BOONE	<b>DMH Licensed</b> No
CENTRALIA	MO 65240-1316	Region 6	Facility Number 10146
STURGEON RESIDENTIAL CARE			
315 E STONE ST		<b>Telephone</b> (573) 687-3012	Alzheimer's Unit No
STURGEON	MO 65284-8907	Level of Care: RCF	Bed Capacity 20
Mailing Address PO BOX 328		County BOONE	<b>DMH Licensed</b> No
STURGEON	MO 65284-0328	Region 6	Facility Number 07733
SUGAR CREEK - ASSISTED LIVIN	G BY AMERICARE		
161 PROFESSIONAL PARKWAY		<b>Telephone</b> (636) 528-3136	Alzheimer's Unit Yes
TROY	MO 63379-2829	Level of Care: ALF**	<b>Bed Capacity</b> 60
Mailing Address 161 PROFESSIONAL	L PRKWY	County LINCOLN	DMH Licensed No
TROY	MO 63379-2829	Region 5	Facility Number 26349
SUMMIT VILLA LIFECARE			
229 KAREN DR		<b>Telephone</b> (573) 896-8567	Alzheimer's Unit Yes
HOLTS SUMMIT	MO 65043-2522	Level of Care: ALF**	<b>Bed Capacity</b> 50
Mailing Address 229 KAREN DR		County CALLAWAY	<b>DMH Licensed</b> No
THOU THE CAN ELECT	3.50 55040.0500		T 111. XX X

**Facility Number** 

21318

MO 65043-2522

HOLTS SUMMIT

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SUMMIT, THE				
3660 SUMMIT		<b>Telephone</b> (816) 931-1196	Alzheimer's Unit	No
KANSAS CITY MO	64111-4632	Level of Care: SNF	Bed Capacity	64
Mailing Address 3660 SUMMIT		County JACKSON	DMH Licensed	No
KANSAS CITY MO	64111-4632	Region 3 Medicare/Medicaid	Facility Number 18	330
SUMMITVIEW TERRACE ASSISTED LIT	VINC BY AMEDICADE			
12101 EAST BANNISTER RD	VINO DI AMERICARE	<b>Telephone</b> (816) 763-6667	Alzheimer's Unit	No
	64138-4913	Level of Care: ALF**	Bed Capacity	52
Mailing Address 12101 EAST BANNISTER		County JACKSON	DMH Licensed	No
· ·	64138-4913	Region 3		311
KANSAS CITT MO	04130-4913	Region 3	racinty Number 10	311
SUNNY HILLS RESIDENTIAL CARE FA	CILITY	T		
17562 IMPERIAL RD	. 100	<b>Telephone</b> (417) 358-6122	Alzheimer's Unit	No
	64836-8753	Level of Care: RCF	Bed Capacity	18
Mailing Address 17562 IMPERIAL RD		County JASPER	DMH Licensed	No
CARTHAGE MO	64836-8753	Region 1	Facility Number 13	351
SUNNY MEADOWS LIVING CENTER				
419 NORTH PROSPECT AVE		<b>Telephone</b> (660) 826-5353	Alzheimer's Unit	No
SEDALIA MO	65301-2729	Level of Care: RCF	Bed Capacity	12
Mailing Address 419 N PROSPECT AVE		County PETTIS	DMH Licensed	Yes
SEDALIA MO	65301-2729	Region 6	Facility Number 06	527
SUNNYHILL INDEPENDENCE CENTER				
3343 ARMBRUSTER ROAD		<b>Telephone</b> (636) 586-2188	Alzheimer's Unit	No
DE SOTO MO	63020-4506	Level of Care: ALF**	Bed Capacity	32
Mailing Address 3343 ARMBRUSTER RD		County JEFFERSON	DMH Licensed	Yes
DE SOTO MO	63020-4506	Region 2	Facility Number 29	674
SUNNYVIEW NURSING HOME & APAR	<b>IMENTS</b>			
1311 EAST 28TH ST		<b>Telephone</b> (660) 359-5647	Alzheimer's Unit	No
	64683-1103	Level of Care: SNF		154
Mailing Address 1311 EAST 28TH ST		County GRUNDY	DMH Licensed	No
TRENTON MO	64683-1103	Region 4 Medicare/Medicaid	Facility Number 18.	509
SUNNYVIEW NURSING HOME & APAR	TMENTS			
1311 EAST 28TH ST		<b>Telephone</b> (660) 359-5647	Alzheimer's Unit	No
TRENTON MO	64683-1103	Level of Care: RCF*	Bed Capacity	38
Mailing Address 1311 EAST 28TH ST		County GRUNDY	DMH Licensed	No
TRENTON MO	64683-1103	Region 4	Facility Number 18	509
SUNRISE NURSING & MEMORY CARE				
600 EAST SUNRISE DR		<b>Telephone</b> (816) 322-1991		Yes
	64083-9037	Level of Care: SNF		152
Mailing Address 600 EAST SUNRISE DR		County CASS	DMH Licensed	No

Medicare/Medicaid

**Facility Number** 

16170

MO 64083-9037

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SUNRISE OF CHESTERFIELD				
1880 CLARKSON RD		<b>Telephone</b> (636) 536-3800	Alzheimer's Unit	Yes
CHESTERFIELD	MO 63017-5000	Level of Care: ICF	Bed Capacity	95
Mailing Address 1880 CLARKSON RE		County SAINT LOUIS COUNTY	DMH Licensed	No
CHESTERFIELD	MO 63017-5000	Region 7	Facility Number	23767
CHESTERIELD	140 03017-3000	Region /	racinty Number	23707
SUNRISE OF CHESTERFIELD				
1880 CLARKSON RD		<b>Telephone</b> (636) 536-3800	Alzheimer's Unit	No
CHESTERFIELD	MO 63017-5000	Level of Care: ALF**	Bed Capacity	3
Mailing Address 1880 CLARKSON RD		County SAINT LOUIS COUNTY	DMH Licensed	No
CHESTERFIELD	MO 63017-5000	Region 7	Facility Number	23767
CHAIDIGE OF DEC DEDEC				
SUNRISE OF DES PERES 13460 MANCHESTER RD		Tolonhono (214) 065 2000	Alzheimer's Unit	Yes
	MO (2121 1724	<b>Telephone</b> (314) 965-3800		
DES PERES	MO 63131-1734	Level of Care: ICF	Bed Capacity	102
Mailing Address 13460 MANCHESTE		County SAINT LOUIS COUNTY	DMH Licensed	No
DES PERES	MO 63131-1734	Region 7	Facility Number	24242
SUNRISE OF WEBSTER GROVES				
45 EAST LOCKWOOD		<b>Telephone</b> (314) 918-7300	Alzheimer's Unit	Yes
SAINT LOUIS	MO 63119-3050	Level of Care: ALF**	<b>Bed Capacity</b>	90
Mailing Address 45 EAST LOCKWOO	DD	County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63119-3050	Region 7	Facility Number	28242
SUNSET HEALTH CARE CENTER				
400 WEST PARK AVE		<b>Telephone</b> (636) 583-2252	Alzheimer's Unit	No
UNION	MO 63084-1140	Level of Care: SNF	Bed Capacity	120
Mailing Address 400 WEST PARK AV		County FRANKLIN	DMH Licensed	No
UNION	MO 63084-1140	Region 6 Medicare/Medicaid	Facility Number	07831
ONON	WO 03004-1140	Region o Medicare/Medicard	Pacinty Number	07831
SUNSET HOME				
1201 SOUTH POLK	MO (4460 4020	<b>Telephone</b> (816) 449-2158	Alzheimer's Unit	No
MAYSVILLE	MO 64469-4028	Level of Care: SNF	Bed Capacity	60
Mailing Address 1201 S POLK		County DEKALB	DMH Licensed	No
MAYSVILLE	MO 64469-4028	Region 4 Medicare/Medicaid	Facility Number	07798
SUNSHINE VILLA				
2520 JAMES ST		<b>Telephone</b> (573) 264-2424	Alzheimer's Unit	No
SCOTT CITY	MO 63780-1219	Level of Care: ALF	<b>Bed Capacity</b>	26
Mailing Address 2520 JAMES ST		County SCOTT	DMH Licensed	Yes
SCOTT CITY	MO 63780-1219	Region 2	Facility Number	07039
SUNTERRA SPRINGS DARDENNE I	PRAIRIE			
7275 STATE HIGHWAY N		<b>Telephone</b> (636) 865-0200	Alzheimer's Unit	No
DARDENNE PRAIRIE	MO 63368-7128	Level of Care: SNF	Bed Capacity	38
Mailing Address 7275 STATE HIGHW		County SAINT CHARLES	DMH Licensed	No
B. A D. E. D. A. D. E.				

Medicare

**Facility Number** 

32331

MO 63368-7128

DARDENNE PRAIRIE

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<sup>\*</sup> Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

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SUNTERRA SPRINGS INDEPENDE	NCE			
19200 E 37TH TERRACE S		<b>Telephone</b> (816) 335-3008	Alzheimer's Unit	No
INDEPENDENCE	MO 64057-8324	Level of Care: SNF	Bed Capacity	38
Mailing Address 19200 E 37TH TERR		County JACKSON	DMH Licensed	No
INDEPENDENCE	MO 64057-8324	Region 3 Medicare	Facility Number	30894
SUNTERRA SPRINGS SPRINGFIEL	.D			
4935 S NATIONAL AVE		<b>Telephone</b> (417) 720-8050	Alzheimer's Unit	No
SPRINGFIELD	MO 65810-2989	Level of Care: SNF	Bed Capacity	38
Mailing Address 4935 S NATIONAL A		County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65810-2989	Region 1 Medicare	Facility Number	31273
SUPERIOR MANOR OF DOWNTON	VN, LLC			
1501 CLINTON STREET	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<b>Telephone</b> (314) 921-2625	Alzheimer's Unit	No
SAINT LOUIS	MO 63106-4100	Level of Care: RCF	Bed Capacity	40
Mailing Address 1501 CLINTON STRI		County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS	MO 63106-4100	Region 7	Facility Number	30136
		region .	- 33-2-1, - 1,2-2-2-2-2	30130
SUPERIOR MANOR OF FESTUS, LI	LC			
12827 HIGHWAY TT		<b>Telephone</b> (636) 352-1000	Alzheimer's Unit	No
FESTUS	MO 63028-4351	Level of Care: SNF	Bed Capacity	55
Mailing Address 12827 HWY TT		County JEFFERSON	DMH Licensed	No
FESTUS	MO 63028-4351	Region 2 Medicare/Medicaid	Facility Number	06820
SURREY PLACE ST LUKE'S HOSPI	ITAL SKILLED NURSING			
14701 OLIVE BLVD	TAL SKILLED WORSHING	<b>Telephone</b> (314) 542-3300	Alzheimer's Unit	No
CHESTERFIELD	MO 63017-2221	Level of Care: SNF	Bed Capacity	130
Mailing Address 14701 OLIVE BLVD	Me 03017 2221	County SAINT LOUIS COUNTY	DMH Licensed	No
_				
CHESTERFIELD	MO 63017-2221	•		
CHESTERFIELD	MO 63017-2221	Region 7 Medicare/Medicaid	Facility Number	15467
SWIFT CREEK RESIDENTIAL CAR		•		
		•		
SWIFT CREEK RESIDENTIAL CAR		Region 7 Medicare/Medicaid	Facility Number	15467
SWIFT CREEK RESIDENTIAL CAR 1673 HIGHWAY 53	RE CENTER	Region 7 Medicare/Medicaid  Telephone (573) 776-6501	Facility Number  Alzheimer's Unit	15467 No
SWIFT CREEK RESIDENTIAL CAR 1673 HIGHWAY 53 POPLAR BLUFF	RE CENTER	Region 7 Medicare/Medicaid  Telephone (573) 776-6501 Level of Care: RCF*	Facility Number  Alzheimer's Unit Bed Capacity	15467 No 12
SWIFT CREEK RESIDENTIAL CAR 1673 HIGHWAY 53 POPLAR BLUFF Mailing Address 1673 HIGHWAY 53	RE CENTER  MO 63901-4132	Region 7 Medicare/Medicaid  Telephone (573) 776-6501 Level of Care: RCF* County BUTLER	Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	15467 No 12 Yes
SWIFT CREEK RESIDENTIAL CAR 1673 HIGHWAY 53 POPLAR BLUFF Mailing Address 1673 HIGHWAY 53 POPLAR BLUFF	RE CENTER  MO 63901-4132	Region 7 Medicare/Medicaid  Telephone (573) 776-6501 Level of Care: RCF* County BUTLER	Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	15467 No 12 Yes
SWIFT CREEK RESIDENTIAL CAR 1673 HIGHWAY 53 POPLAR BLUFF Mailing Address 1673 HIGHWAY 53 POPLAR BLUFF SWITZER RESIDENTIAL CARE	RE CENTER  MO 63901-4132	Region 7 Medicare/Medicaid  Telephone (573) 776-6501  Level of Care: RCF*  County BUTLER  Region 2	Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 12 Yes 20386
SWIFT CREEK RESIDENTIAL CAR 1673 HIGHWAY 53 POPLAR BLUFF Mailing Address 1673 HIGHWAY 53 POPLAR BLUFF SWITZER RESIDENTIAL CARE 3260 MYSTIC LANE	MO 63901-4132  MO 63901-4132  MO 63901-3067	Region 7 Medicare/Medicaid  Telephone (573) 776-6501 Level of Care: RCF* County BUTLER Region 2  Telephone (573) 785-9399	Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 12 Yes 20386
SWIFT CREEK RESIDENTIAL CAR 1673 HIGHWAY 53 POPLAR BLUFF Mailing Address 1673 HIGHWAY 53 POPLAR BLUFF  SWITZER RESIDENTIAL CARE 3260 MYSTIC LANE POPLAR BLUFF	MO 63901-4132  MO 63901-4132  MO 63901-3067	Region 7 Medicare/Medicaid  Telephone (573) 776-6501 Level of Care: RCF* County BUTLER Region 2  Telephone (573) 785-9399 Level of Care: RCF*	Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	No 12 Yes 20386 No 20
SWIFT CREEK RESIDENTIAL CAR 1673 HIGHWAY 53 POPLAR BLUFF Mailing Address 1673 HIGHWAY 53 POPLAR BLUFF SWITZER RESIDENTIAL CARE 3260 MYSTIC LANE POPLAR BLUFF Mailing Address 3260 MYSTIC LANE POPLAR BLUFF	MO 63901-4132  MO 63901-4132  MO 63901-3067	Region 7 Medicare/Medicaid  Telephone (573) 776-6501 Level of Care: RCF* County BUTLER Region 2  Telephone (573) 785-9399 Level of Care: RCF* County BUTLER	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	No 12 Yes 20386 No 20 Yes
SWIFT CREEK RESIDENTIAL CAR 1673 HIGHWAY 53 POPLAR BLUFF Mailing Address 1673 HIGHWAY 53 POPLAR BLUFF SWITZER RESIDENTIAL CARE 3260 MYSTIC LANE POPLAR BLUFF Mailing Address 3260 MYSTIC LANE POPLAR BLUFF SYLVAN HOUSE	MO 63901-4132 MO 63901-4132 MO 63901-3067	Region 7 Medicare/Medicaid  Telephone (573) 776-6501 Level of Care: RCF* County BUTLER Region 2  Telephone (573) 785-9399 Level of Care: RCF* County BUTLER Region 2	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 12 Yes 20386 No 20 Yes 20739
SWIFT CREEK RESIDENTIAL CAR 1673 HIGHWAY 53 POPLAR BLUFF Mailing Address 1673 HIGHWAY 53 POPLAR BLUFF SWITZER RESIDENTIAL CARE 3260 MYSTIC LANE POPLAR BLUFF Mailing Address 3260 MYSTIC LANE POPLAR BLUFF SYLVAN HOUSE 30 SHERMAN RD	MO 63901-4132  MO 63901-4132  MO 63901-3067  MO 63901-3067	Region 7 Medicare/Medicaid  Telephone (573) 776-6501 Level of Care: RCF* County BUTLER Region 2  Telephone (573) 785-9399 Level of Care: RCF* County BUTLER Region 2  Telephone (314) 892-2212	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 12 Yes 20386 No 20 Yes 20739
SWIFT CREEK RESIDENTIAL CAR 1673 HIGHWAY 53 POPLAR BLUFF Mailing Address 1673 HIGHWAY 53 POPLAR BLUFF SWITZER RESIDENTIAL CARE 3260 MYSTIC LANE POPLAR BLUFF Mailing Address 3260 MYSTIC LANE POPLAR BLUFF SYLVAN HOUSE 30 SHERMAN RD SAINT LOUIS	MO 63901-4132 MO 63901-4132 MO 63901-3067	Region 7 Medicare/Medicaid  Telephone (573) 776-6501 Level of Care: RCF* County BUTLER Region 2  Telephone (573) 785-9399 Level of Care: RCF* County BUTLER Region 2  Telephone (314) 892-2212 Level of Care: RCF	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 12 Yes 20386 No 20 Yes 20739
SWIFT CREEK RESIDENTIAL CAR 1673 HIGHWAY 53 POPLAR BLUFF Mailing Address 1673 HIGHWAY 53 POPLAR BLUFF SWITZER RESIDENTIAL CARE 3260 MYSTIC LANE POPLAR BLUFF Mailing Address 3260 MYSTIC LANE POPLAR BLUFF SYLVAN HOUSE 30 SHERMAN RD	MO 63901-4132  MO 63901-4132  MO 63901-3067  MO 63901-3067	Region 7 Medicare/Medicaid  Telephone (573) 776-6501 Level of Care: RCF* County BUTLER Region 2  Telephone (573) 785-9399 Level of Care: RCF* County BUTLER Region 2  Telephone (314) 892-2212	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 12 Yes 20386 No 20 Yes 20739

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SYLVIA G THOMPSON RESIDENC	CE CENTER, INC			
3333 WEST TENTH ST		<b>Telephone</b> (660) 826-2118	Alzheimer's Unit	Yes
SEDALIA	MO 65301-2113	Level of Care: SNF	Bed Capacity	120
Mailing Address 3333 WEST TENTH	ST	County PETTIS	DMH Licensed	No
SEDALIA	MO 65301-2113	Region 6 Medicaid	Facility Number	17278
TEAL LAKE - ASSISTED LIVING I	DV AMEDICADE			
1722 HUNTINGFIELD DR	DI AMERICARE	<b>Telephone</b> (573) 582-7800	Alzheimer's Unit	No
MEXICO	MO 65265-3808	Level of Care: ALF**	Bed Capacity	42
Mailing Address 1722 HUNTINGFIEI		County AUDRAIN	DMH Licensed	No
MEXICO	MO 65265-3808	Region 5	Facility Number	
WIEAICO	WO 03203-3606	Region 3	Facility Number	23534
TESSLAND RESIDENTIAL CARE	FACILITY LLC			
24583 HIGHWAY 5		<b>Telephone</b> (660) 265-4391	Alzheimer's Unit	No
MILAN	MO 63556-2809	Level of Care: RCF	Bed Capacity	9
Mailing Address 24583 HWY 5		County SULLIVAN	DMH Licensed	Yes
MILAN	MO 63556-2809	Region 5	Facility Number	19990
THOMAS RESIDENTIAL CARE FA	ACILITY 3			
1415 OLIVE ST		<b>Telephone</b> (816) 273-5070	Alzheimer's Unit	No
SAINT JOSEPH	MO 64503-2443	Level of Care: RCF	Bed Capacity	20
Mailing Address 1415 OLIVE ST		County BUCHANAN	DMH Licensed	Yes
SAINT JOSEPH	MO 64503-2443	Region 4	Facility Number	06076
TIFFANY HEIGHTS				
1531 NEBRASKA ST		<b>Telephone</b> (660) 442-3146	Alzheimer's Unit	No
MOUND CITY	MO 64470-1610	Level of Care: SNF	Bed Capacity	60
Mailing Address PO BOX 308		County HOLT	DMH Licensed	No
MOUND CITY	MO 64470-0308	Region 4 Medicare/Medicaid	Facility Number	07998
TIFFANY SPRINGS REHABILITAT	TION & HEAT TH CARE CENTER			
9191 N AMBASSADOR DR	HOW & HEALTH CARE CENTER	<b>Telephone</b> (816) 741-5570	Alzheimer's Unit	No
KANSAS CITY	MO 64154-7247	Level of Care: SNF	Bed Capacity	120
Mailing Address 9191 N AMBASSAE		County PLATTE	DMH Licensed	No
KANSAS CITY	MO 64154-7247	Region 4 Medicare/Medicaid	Facility Number	30748
Manda CII I	1010 04134 7247	Region + Medicale/Medicalu	racinty runner	30740
TIFFANY SPRINGS SENIOR CARE	E COMMUNITY			
9101 N AMBASSADOR DRIVE		<b>Telephone</b> 816-621-3810	Alzheimer's Unit	Yes
KANSAS CITY	MO 64154-7295	Level of Care: ALF**	Bed Capacity	89
Mailing Address 9101 N AMBASSAL		County PLATTE	DMH Licensed	No
KANSAS CITY	MO 64154-7295	Region 4	Facility Number	30748
TIGER PLACE				
2910 BLUFF CREEK DR		<b>Telephone</b> (573) 256-4620	Alzheimer's Unit	No
COLUMBIA	MO 65201-3522	Level of Care: ICF	Bed Capacity	112
Mailing Address 2910 BLUFF CREEF	/ DD			
COLUMBIA	MO 65201-3522	County BOONE  Region 6	DMH Licensed Facility Number	No 24341

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TIMBERS, THE		T-l	41-1	NI-
239 KAREN DRIVE HOLTS SUMMIT	MO 65043-2522	Telephone (573) 415-0390 Level of Care: ALF**	Alzheimer's Unit Bed Capacity	No 50
Mailing Address 239 KAREN DRIVE	WO 03043-2322	County CALLAWAY	DMH Licensed	No
HOLTS SUMMIT	MO 65043-2522	Region 6	Facility Number	30384
HOLIS SUMMIT	110 03043-2322	Region 0	racinty runner	30364
TIPTON OAK MANOR				
601 WEST MORGAN ST		<b>Telephone</b> (660) 433-5574	Alzheimer's Unit	Yes
TIPTON	MO 65081-8214	Level of Care: SNF	<b>Bed Capacity</b>	66
Mailing Address 601 WEST MORGAN	UST	County MONITEAU	DMH Licensed	No
TIPTON	MO 65081-8214	Region 6 Medicare/Medicaid	Facility Number	08036
TOWN & COUNTRY SENIOR LIVIN	NC THE			
1020 WOODS MILL ROAD	,	<b>Telephone</b> (636) 527-4444	Alzheimer's Unit	Yes
TOWN AND COUNTRY	MO 63017-0603	Level of Care: ALF**	Bed Capacity	95
Mailing Address 1020 WOODS MILL I		County SAINT LOUIS COUNTY	DMH Licensed	No
TOWN AND COUNTRY	MO 63017-0603	Region 7	Facility Number	30612
			•	50012
TOWNSHIP SENIOR LIVING, THE				
4150 WEST REPUBLIC ROAD		<b>Telephone</b> (417) 881-7800	Alzheimer's Unit	Yes
BATTLEFIELD	MO 65619-7111	Level of Care: ALF**	Bed Capacity	66
Mailing Address 4150 WEST REPUBL		County GREENE	DMH Licensed	No
BATTLEFIELD	MO 65619-7111	Region 1	Facility Number	31903
TROY MANOR				
200 THOMPSON DR		<b>Telephone</b> (636) 528-8446	Alzheimer's Unit	No
TROY	MO 63379-2308	Level of Care: ALF	<b>Bed Capacity</b>	20
Mailing Address 200 THOMPSON DR		County LINCOLN	DMH Licensed	No
TROY	MO 63379-2308	Region 5	Facility Number	05397
TROY MANOR				
200 THOMPSON DR		<b>Telephone</b> (636) 528-8446	Alzheimer's Unit	Yes
TROY	MO 63379-2308	Level of Care: SNF	Bed Capacity	130
Mailing Address 200 THOMPSON DR		County LINCOLN	DMH Licensed	No
TROY	MO 63379-2308	Region 5 Medicare/Medicaid	Facility Number	05397
TRUMAN HEALTHCARE & REHAE	BILITATION CENTER			
206 WEST FIRST ST	SELITITION CENTER	<b>Telephone</b> (417) 682-5718	Alzheimer's Unit	Yes
LAMAR	MO 64759-1291	Level of Care: SNF	Bed Capacity	123
Mailing Address 206 WEST FIRST ST		County BARTON	DMH Licensed	No
LAMAR	MO 64759-1291	Region 1 Medicare/Medicaid	Facility Number	01346
TRUMAN LAKE MANOR, INC		Tolonhono (417) (44 2248	Alahaimanta IIi4	VEC
600 EAST 7TH ST LOWRY CITY	MO 64763-9671	Telephone (417) 644-2248 Level of Care: SNF	Alzheimer's Unit	YES 120
Mailing Address PO BOX 415	WO 04/03-70/1	Level of Care: SNF County SAINT CLAIR	Bed Capacity DMH Licensed	No
Manning Address TO BOA 413	250 (450 0445	County SAINT CLAIR	Divili Licenseu	110

Medicare/Medicaid

**Facility Number** 

08140

MO 64763-0415

LOWRY CITY

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10   10   10   10   10   10   10   10	TRUCTUELL LIVING OF BAVEOU	VNI			
RAYTOWN	TRUSTWELL LIVING OF RAYTOW	VIN	T-l (916) 252 2400	Alabainanta Tirita Na	
Mulling Address 28 SAVANNAH TERRACE		MO (4122 4992	_		
RAYTOWN		MO 64133-4893			
TURNERS ROCK  3911 EAST HIGHWAY D  SPRINGFIELD  MO 65809-  Level of Carre: ALP™ Bed Capacity 70  Mailing Address 3911 EAST HIGHWAY D  County 6KEENE  DMIL Licensed No  SPRINGFIELD  MO 65809-  Region 1 Telephone 6360 542-5200  Alzheimer's Unit 7es  WENTZYILLE  MO 63385-3741  Level of Carre: ALF™ Bed Capacity 70  Mailing Address 228 SAVANAH TERRACE  VENTZYILLE  MO 63385-3741  Level of Carre: ALF™ Bed Capacity 70  Mailing Address 228 SAVANAH TERRACE  NO 63385-3741  Level of Carre: ALF™ Bed Capacity 70  Mailing Address 228 SAVANAH TERRACE  NO 63385-3741  Level of Carre: ALF™ Bed Capacity 70  Mailing Address 707 EMGE RD  OFALLON  MO 63366-2118  Level of Carre: ALF™ Bed Capacity 70  Mailing Address 707 EMGE RD  OFALLON  MO 63366-2118  Level of Carre: ACF™ Bed Capacity 149  Mailing Address 707 EMGE RD  OFALLON  MO 63366-2118  Level of Carre: SRCF™ Bed Capacity 149  Mailing Address 707 EMGE RD  OFALLON  MO 63501-5302  Level of Carre: SNF Bed Capacity 120  Moiling Address 1090 S JAMISON  KIRKSYILLE  MO 63501-5302  Level of Carre: SNF Bed Capacity 120  Moiling Address 1090 S JAMISON  KIRKSYILLE  MO 63130-1944  Level of Carre: SNF Bed Capacity 120  Moiling Address 1090 FARTINGE AVE  SAINT LOUIS NAMI Licensed No  SAINT LOUIS NAMI Licensed 120  Moiling Address 1090 FARTINGE AVE  SAINT LOUIS NAMI Licensed 120  County Saint LOUIS COUNTY DMIL Licensed 120  Moiling Address 1090 FARTINGE AVE  County Saint LOUIS COUNTY DMIL Licensed 120  No  SAINT LOUIS NAMI Licensed 120  Moiling Address 1090 FARTINGE AVE  SAINT LOUIS NAMI Licensed 120  County Saint LOUIS COUNTY DMIL Licensed 120  Moiling Address 120 PARTRIDGE AVE  SAINT LOUIS NAMI Licensed 120  County Saint LOUIS COUNTY DMIL Licensed 120  Moiling Address 120 PARTRIDGE AVE 120  County Saint LOUIS COUNTY DMIL Licensed 120  Moiling Address 120  Moiling Ad	8	MO (4122 4002	·		
Telephore   (417, 459-4070   Atheimer's Unit   Yes   SPRINGFIELD   Mo   65809-   Coved of Care   Al. F**   Bed Capacity   76   Nating Address 3911 EAST HIGHWAY D   Count   Region     Facility Number   32441	RAYTOWN	MO 64133-4893	Region 3	Facility Number 24227	,
Telephore   (417, 459-4070   Atheimer's Unit   Yes   SPRINGFIELD   Mo   65809-   Coved of Care   Al. F**   Bed Capacity   76   Nating Address 3911 EAST HIGHWAY D   Count   Region     Facility Number   32441	TUDNEDS DACK				
SPRINGFIELD			Talanhana (417) 459-4070	Alzhoimor's Unit Ves	,
Mailling Address 3911 EAST HIGHWAY D   County   GRENE   DMII Licensed   No SPRINGFEILD   No 65809-1   Region		MO 65800	_		
SPRINGFEILD   MO 65809-   Region     Facility Number   32441				- the companies	
TWIN OAKS AT HERITAGE POINTE  228 SAVANNAH TERRACE					
228 SAVANNAH TERRACE	SPRINGFEILD	MO 65809-	Region 1	Facility Number 32441	
WENTZVILLE	TWIN OAKS AT HERITAGE POINT	E			
Mailing Address 228 SAVANNAH TERRACE         County         SAINT CHARLES         DMII Licensed         No           WENTZVILLE         MO 63385-3741         Region 5         Facility Number         26877           TWIN OAKS ESTATE, INC           707 EMGE RD         Telephone         (636) 542-5200         Alzheimer's Unit         No           OFALLON         MO 63366-2118         Level of Care:         RCF*         Bed Capacity         149           Mailing Address 707 EMGE RD         County         SAINT CHARLES         DMII Licensed         No           OFALLON         MO 63366-2118         Region 5         Facility Number         08209           TWIN PINES ADULT CARE CENTER         Telephone         (660) 665-2887         Alzheimer's Unit         No           KIRKSVIILE         MO 63501-5302         Level of Care:         SNF         Bed Capacity         120           Mailing Address 1900 S JAMISON         County         ADAIR         DMII Licensed         No           KIRKSVIILE         MO 63501-5302         Region 5         Medicare/Medicaid         Facility Number         08218           UCITY FOREST MANOR         Telephone         (314) 862-5556         Alzheimer's Unit         No           SAINT LOU	228 SAVANNAH TERRACE		<b>Telephone</b> (636) 542-5200	Alzheimer's Unit Yes	3
WENTZVILLE	WENTZVILLE	MO 63385-3741	Level of Care: ALF**	Bed Capacity 70	)
WENTZVILLE	Mailing Address 228 SAVANNAH TEI	RRACE	County SAINT CHARLES	DMH Licensed No.	)
TWIN OAKS ESTATE, INC  707 EMGE RD  OFALLON  MO 63366-2118  Level of Care: RCF* Bed Capacity 149 Malling Address 707 EMGE RD  OFALLON  MO 63366-2118  Region 5 SAINT CHARLES DMH Licensed No OFALLON  MO 63366-2118  Region 5 Facility Number 08209  TWIN PINES ADULT CARE CENTER  TUNIN PINES ADULT CARE CENTER  TUNIN PINES ADULT CARE CENTER  TUNIN PINES ADULT CARE MO 63501-5302  Level of Care: SNF Bed Capacity 120 Mailing Address 1900 S JAMISON  County ADAIR  MO 63501-5302  Level of Care: SNF Bed Capacity 120 Mailing Address 1900 S JAMISON  County ADAIR  DMH Licensed No KIRKSVILLE  MO 63501-5302  Region 5 Medicare/Medicaid Facility Number 08218  U-CITY FOREST MANOR  1301 PARTRIDGE AVE  Telephone (314) 862-5556 Alzheimer's Unit No SAINT LOUIS  MO 63130-1944  Level of Care: SNF Bed Capacity 120 Mailing Address 1301 PARTRIDGE AVE  County SAINT LOUIS COUNTY DMH Licensed No SAINT LOUIS  MO 63130-1944  Region 7 Medicare/Medicaid Facility Number 15454  UNION MANOR, LLC  2711 NORTH UNION BLVD  Telephone (314) 383-7310 Alzheimer's Unit No SAINT LOUIS MO 63113-1003  Level of Care: RCF* Bed Capacity 50 Malling Address 2711 NORTH UNION BLVD  County SAINT LOUIS CITY DMH Licensed Yes SAINT LOUIS MO 63113-1003  Region 7 Facility Number 11002  UNION NURSING  UNION NURSING  Telephone (663) 206-8585 Alzheimer's Unit No Bed Capacity 60 Mailing Address 1080 MARIE LANE  UNION MARIE LANE  Telephone (663) 206-8585 Alzheimer's Unit No Bed Capacity 60 Mailing Address 1080 MARIE LANE  UNION MARIE LANE  County FRANKLIN  DMH Licensed No Bed Capacity 60 Mailing Address 1080 MARIE LANE  County FRANKLIN  DMH Licensed No	_		•	Facility Number 26877	7
Telephone   Galo   Salar			Region 5	20077	
CFALLON					
Mailing Address 707 EMGE RD	707 EMGE RD		<b>Telephone</b> (636) 542-5200	Alzheimer's Unit No	)
OFALLON	O'FALLON	MO 63366-2118	Level of Care: RCF*	Bed Capacity 149	)
TWIN PINES ADULT CARE CENTER  1900 \$ JAMISON	Mailing Address 707 EMGE RD		County SAINT CHARLES	DMH Licensed No.	)
Telephone   (660) 665-2887   Alzheimer's Unit   NO	O'FALLON	MO 63366-2118	Region 5	Facility Number 08209	)
Telephone   (660) 665-2887   Alzheimer's Unit   NO	TWIN PINES ADULT CARE CENTE	R			
Level of Care:   SNF   Bed Capacity   120			Telephone (660) 665-2887	Alzheimer's Unit NO	)
Mailing Address 1900 S JAMISON         County Region 5         ADAIR Medicare/Medicaid         DMH Licensed Pacility Number         No           U-CTTY FOREST MANOR         1301 PARTRIDGE AVE SAINT LOUIS MO 63130-1944         1200 Mailing Address 1301 PARTRIDGE AVE County SAINT LOUIS COUNTY DMH Licensed No         SAINT LOUIS COUNTY DMH Licensed No         SAINT LOUIS COUNTY DMH Licensed No         SAINT LOUIS MO 63130-1944         15454         15454           UNION MANOR, LLC         2711 NORTH UNION BLVD         Telephone (314) 383-7310 Alzheimer's Unit No         SAINT LOUIS Med Capacity         50           Mailing Address 2711 NORTH UNION BLVD         County SAINT LOUIS CITY DMH Licensed         Yes SAINT LOUIS Med Capacity         50           UNION NURSING         1080 MARIE LANE         Telephone (636) 206-8585         Alzheimer's Unit No         No           UNION MASIE LANE         1080 MARIE LANE         1080 Gage Capacity         60           Mailing Address 1080 MARIE LANE         County FRANKLIN         DMH Licensed         No		MO 63501-5302	• '		
No					
U-CTTY FOREST MANOR    1301 PARTRIDGE AVE   Telephone   (314) 862-5556   Alzheimer's Unit   No	_	MO 63501-5302	•		
Telephone   (314) 862-5556   Alzheimer's Unit   No	KIKKSVILLE	NIO 03301-3302	Region 5 Wedicare/Medicard	racinty Number 08218	,
SAINT LOUIS         MO 63130-1944         Level of Care: SNF         Bed Capacity         120           Mailing Address 1301 PARTRIDGE AVE         County         SAINT LOUIS COUNTY         DMH Licensed         No           SAINT LOUIS         MO 63130-1944         Region 7         Medicare/Medicaid         Facility Number         15454           UNION MANOR, LLC         Telephone         (314) 383-7310         Alzheimer's Unit         No           SAINT LOUIS         MO 63113-1003         Level of Care: RCF*         Bed Capacity         50           Mailing Address 2711 NORTH UNION BLVD         County         SAINT LOUIS CITY         DMH Licensed         Yes           SAINT LOUIS         MO 63113-1003         Region 7         Facility Number         11002           UNION NURSING         Telephone         (636) 206-8585         Alzheimer's Unit         No           UNION         MO 63084-1056         Level of Care: SNF         Bed Capacity         60           Mailing Address 1080 MARIE LANE         County         FRANKLIN         DMH Licensed         No	U-CITY FOREST MANOR				
Mailing Address 1301 PARTRIDGE AVE         County         SAINT LOUIS COUNTY         DMH Licensed         No           SAINT LOUIS         MO 63130-1944         Region 7         Medicare/Medicaid         Facility Number         15454           UNION MANOR, LLC           2711 NORTH UNION BLVD         Telephone         (314) 383-7310         Alzheimer's Unit         No           SAINT LOUIS         MO 63113-1003         Level of Care:         RCF*         Bed Capacity         50           Mailing Address 2711 NORTH UNION BLVD         County         SAINT LOUIS CITY         DMH Licensed         Yes           SAINT LOUIS         MO 63113-1003         Region 7         Facility Number         11002           UNION NURSING           1080 MARIE LANE         Telephone         (636) 206-8585         Alzheimer's Unit         No           UNION         MO 63084-1056         Level of Care:         SNF         Bed Capacity         60           Mailing Address 1080 MARIE LANE         County         FRANKLIN         DMH Licensed         No	1301 PARTRIDGE AVE		<b>Telephone</b> (314) 862-5556	Alzheimer's Unit No	)
SAINT LOUIS         MO 63130-1944         Region 7         Medicare/Medicaid         Facility Number         15454           UNION MANOR, LLC         2711 NORTH UNION BLVD         Telephone         (314) 383-7310         Alzheimer's Unit         No           SAINT LOUIS         MO 63113-1003         Level of Care:         RCF*         Bed Capacity         50           Mailing Address 2711 NORTH UNION BLVD         County         SAINT LOUIS CITY         DMH Licensed         Yes           SAINT LOUIS         MO 63113-1003         Region 7         Facility Number         11002           UNION NURSING         Telephone         (636) 206-8585         Alzheimer's Unit         No           UNION         MO 63084-1056         Level of Care:         SNF         Bed Capacity         60           Mailing Address 1080 MARIE LANE         County         FR-NKLIN         DMH Licensed         No	SAINT LOUIS	MO 63130-1944	Level of Care: SNF	Bed Capacity 120	)
UNION MANOR, LLC  2711 NORTH UNION BLVD  SAINT LOUIS  MO 63113-1003  Level of Care: RCF*  Bed Capacity  50  Mailing Address 2711 NORTH UNION BLVD  County  SAINT LOUIS CITY  DMH Licensed  Yes  SAINT LOUIS  MO 63113-1003  Region 7  Facility Number  11002  UNION NURSING  1080 MARIE LANE  UNION  MO 63084-1056	Mailing Address 1301 PARTRIDGE A	VE	County SAINT LOUIS COUNTY	DMH Licensed No.	)
Telephone         (314) 383-7310         Alzheimer's Unit         No           SAINT LOUIS         MO 63113-1003         Level of Care:         RCF*         Bed Capacity         50           Mailing Address 2711 NORTH UNION BLVD         County         SAINT LOUIS CITY         DMH Licensed         Yes           SAINT LOUIS         MO 63113-1003         Region 7         Facility Number         11002           UNION NURSING           1080 MARIE LANE         Telephone         (636) 206-8585         Alzheimer's Unit         No           UNION         MO 63084-1056         Level of Care:         SNF         Bed Capacity         60           Mailing Address 1080 MARIE LANE         County         FR-NKLIN         DMH Licensed         No	SAINT LOUIS	MO 63130-1944	Region 7 Medicare/Medicaid	Facility Number 15454	ŀ
Telephone         (314) 383-7310         Alzheimer's Unit         No           SAINT LOUIS         MO 63113-1003         Level of Care:         RCF*         Bed Capacity         50           Mailing Address 2711 NORTH UNION BLVD         County         SAINT LOUIS CITY         DMH Licensed         Yes           SAINT LOUIS         MO 63113-1003         Region 7         Facility Number         11002           UNION NURSING           1080 MARIE LANE         Telephone         (636) 206-8585         Alzheimer's Unit         No           UNION         MO 63084-1056         Level of Care:         SNF         Bed Capacity         60           Mailing Address 1080 MARIE LANE         County         FR-NKLIN         DMH Licensed         No	UNION MANOR LLC				
SAINT LOUIS         MO 63113-1003         Level of Care:         RCF*         Bed Capacity         50           Mailing Address 2711 NORTH UNION BLVD         County         SAINT LOUIS CITY         DMH Licensed         Yes           SAINT LOUIS         MO 63113-1003         Region 7         Facility Number         11002           UNION NURSING           1080 MARIE LANE         Telephone (636) 206-8585         Alzheimer's Unit         No           UNION         MO 63084-1056         Level of Care:         SNF         Bed Capacity         60           Mailing Address 1080 MARIE LANE         County         FRANKLIN         DMH Licensed         No			Tolophono (214) 292 7210	Alzhaimar's Unit No	
Mailing Address 2711 NORTH UNION BLVD         County         SAINT LOUIS CITY         DMH Licensed         Yes           SAINT LOUIS         MO 63113-1003         Region 7         Facility Number         11002           UNION NURSING           1080 MARIE LANE         Telephone (636) 206-8585         Alzheimer's Unit         No           UNION         MO 63084-1056         Level of Care:         SNF         Bed Capacity         60           Mailing Address 1080 MARIE LANE         County         FR NKLIN         DMH Licensed         No		MO 62112 1002	• '		
SAINT LOUIS       MO 63113-1003       Region 7       Facility Number       11002         UNION NURSING         1080 MARIE LANE       Telephone (636) 206-8585       Alzheimer's Unit       No         UNION       MO 63084-1056       Level of Care: SNF       Bed Capacity       60         Mailing Address 1080 MARIE LANE       County       FR NKLIN       DMH Licensed       No					
UNION NURSING           1080 MARIE LANE         Telephone (636) 206-8585         Alzheimer's Unit No           UNION         MO 63084-1056         Level of Care: SNF         Bed Capacity         60           Mailing Address 1080 MARIE LANE         County FR. NKLIN         DMH Licensed         No			·		
1080 MARIE LANETelephone $(636)$ 206-8585Alzheimer's UnitNoUNIONMO 63084-1056Level of Care:SNFBed Capacity60Mailing Address 1080 MARIE LANECountyFR NKLINDMH LicensedNo	SAINT LOUIS	MO 03113-1003	Kegion /	racinty Number 11002	:
UNION MO 63084-1056 Level of Care: SNF Bed Capacity 60 Mailing Address 1080 MARIE LANE County FRANKLIN DMH Licensed No	UNION NURSING				
Mailing Address 1080 MARIE LANE    County    FRANKLIN    DMH Licensed    No	1080 MARIE LANE		<b>Telephone</b> (636) 206-8585	Alzheimer's Unit No	)
	UNION	MO 63084-1056	Level of Care: SNF	<b>Bed Capacity</b> 60	)
UNION MO 63084-1056 Region 6 Medicare/Medicaid Facility Number 31476	Mailing Address 1080 MARIE LANE		County FRANKLIN	DMH Licensed No.	)
•	UNION	MO 63084-1056	Region 6 Medicare/Medicaid	Facility Number 31476	í

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URBANA GROUP HOME		T. 1 (000) 000 7444	
310 WALNUT ST	NO 65767 0200	<b>Telephone</b> (800) 993-5141	Alzheimer's Unit No
URBANA	MO 65767-9208	Level of Care: RCF	Bed Capacity 20
Mailing Address 310 WALNUT ST	NO 65767 0200	County DALLAS	DMH Licensed Yes
URBANA	MO 65767-9208	Region 1	Facility Number 08242
VALLEY MANOR AND REHABILIT	CATION CENTED		
1410 HOSPITAL DR	ATION CENTER	<b>Telephone</b> (816) 637-1010	Alzheimer's Unit No
EXCELSIOR SPRINGS	MO 64024-1168	Level of Care: SNF	Bed Capacity 120
Mailing Address 1410 HOSPITAL DR	1410 04024-1100	County CLAY	DMH Licensed No
EXCELSIOR SPRINGS	MO 64024-1168	Region 4 Medicare/Medicaid	Facility Number 02425
EXCELSION OF NET CO	110 01021 1100	Region i Medical e/Medicalu	racinty (value)
VALLEY PARK NORTH			
2631 FAIRWAY DR		<b>Telephone</b> (573) 592-4995	Alzheimer's Unit No
FULTON	MO 65251-3936	Level of Care: RCF	<b>Bed Capacity</b> 19
Mailing Address 2631 FAIRWAY DR		County CALLAWAY	DMH Licensed No
FULTON	MO 65251-3936	Region 6	Facility Number 29982
****	VALUE OF THE PARTY		
VALLEY PARK RETIREMENT CEN	NTER	(572) 20 < 0202	
355 KAREN DR	140 (5040 2510	<b>Telephone</b> (573) 896-0208	Alzheimer's Unit No
HOLTS SUMMIT	MO 65043-2519	Level of Care: RCF	Bed Capacity 22
Mailing Address 355 KAREN DR	MO 65043-2519	County CALLAWAY	DMH Licensed No
HOLTS SUMMIT	MO 65043-2519	Region 6	Facility Number 27986
VALLEY PARK WEST			
678 WINDMILL RIDGE		<b>Telephone</b> (573) 796-2520	Alzheimer's Unit No
CALIFORNIA	MO 65018-1964	Level of Care: RCF	<b>Bed Capacity</b> 34
Mailing Address 678 WINDMILL RIDG	GE	County MONITEAU	<b>DMH Licensed</b> No
CALIFORNIA	MO 65018-1964	Region 6	Facility Number 30595
YALLEY DECIDENTELL CADE			
VALLEY RESIDENTIAL CARE 101 SOUTH KNOB ST		<b>Telephone</b> (573) 546-3080	Alzheimer's Unit No
IRONTON	MO 63650-1501	Level of Care: RCF	Bed Capacity 12
Mailing Address 203 SOUTH WASHIN		County IRON	DMH Licensed Yes
FARMINGTON	MO 63640-1836	Region 2	Facility Number 01901
TARMINOTOR	WO 03040-1030	Region 2	racinty Number 01901
VALLEY VIEW HEALTH & REHAB	BILITATION		
1600 EAST ROLLINS ST		<b>Telephone</b> (660) 263-6887	Alzheimer's Unit No
MOBERLY	MO 65270-2478	Level of Care: SNF	<b>Bed Capacity</b> 96
Mailing Address 1600 E ROLLINS ST		County RANDOLPH	<b>DMH Licensed</b> No
MOBERLY	MO 65270-2478	Region 5 Medicare/Medicaid	Facility Number 13167
VERONICA HOUSE			
12284 DEPAUL DR		<b>Telephone</b> (314) 209-8814	Alzheimer's Unit No
BRIDGETON	MO 63044-2508	Level of Care: ALF**	Bed Capacity 100
Mailing Address 12284 DEPAUL DR		County SAINT LOUIS COUNTY	DMH Licensed No
BRIDGETON	MO 63044-2508	Region 7	Facility Number 22460
			•

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VICTORIAN PLACE OF CUBA, RES	SIDENTIAL CARE BY AMERICARE				
901 HIGHWAY DD		Telephone	(573) 885-0551	Alzheimer's Unit	No
CUBA	MO 65453-8089	Level of Care:	RCF	<b>Bed Capacity</b>	48
Mailing Address 901 HWY DD		County CR	AWFORD	DMH Licensed	No
CUBA	MO 65453-8089	Region 6		Facility Number	25463
		8		٠	
	, RESIDENTIAL CARE BY AMERICA				
2120 VILLAGE LANE		Telephone	(573) 486-5060	Alzheimer's Unit	No
HERMANN	MO 65041-1600	Level of Care:	RCF	Bed Capacity	48
Mailing Address 2120 VILLAGE LANE	Ξ	County GA	SCONADE	DMH Licensed	No
HERMANN	MO 65041-1600	Region 6		Facility Number	24982
VICTORIAN PLACE OF OWENSVII	LLE, RESIDENTIAL CARE BY AMER	ICARE			
301 NORTH 7TH ST		Telephone	(573) 437-5396	Alzheimer's Unit	No
OWENSVILLE	MO 65066-1075	Level of Care:	RCF	Bed Capacity	48
Mailing Address 301 NORTH 7TH ST			SCONADE	DMH Licensed	No
OWENSVILLE	MO 65066-1075	Region 6		Facility Number	24133
VICTORIAN PLACE OF ST CLAIR,	ASSISTED LIVING BY AMERICARE				
160 CHARLES DR		Telephone	(636) 322-0003	Alzheimer's Unit	No
SAINT CLAIR	MO 63077-1936	Level of Care:	ALF**	<b>Bed Capacity</b>	48
Mailing Address 160 CHARLES DR		County FR.	ANKLIN	<b>DMH Licensed</b>	No
SAINT CLAIR	MO 63077-1936	Region 6		<b>Facility Number</b>	26005
VICTORIAN PLACE OF SULLIVAN 1250 EAST SPRINGFIELD RD SULLIVAN Mailing Address 1250 EAST SPRINGF SULLIVAN	MO 63080-1358 IELD RD MO 63080-1358	Telephone Level of Care:	(573) 468-5217 ALF** ANKLIN	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 48 No 26324
VICTORIAN PLACE OF UNION, AS	SISTED LIVING BY AMERICARE				
1320 W MAIN		Telephone	(636) 584-0085	Alzheimer's Unit	No
UNION	MO 63084-1084	Level of Care:	ALF**	<b>Bed Capacity</b>	48
Mailing Address 1320 W MAIN		County FRA	ANKLIN	DMH Licensed	No
UNION	MO 63084-1084	Region 6		Facility Number	24408
VICTORIAN PLACE OF WASHING	TON, ASSISTED LIVING BY AMERIC	ARE Telephone	(636) 390-9500	Alzheimer's Unit	No
WASHINGTON	MO 63090-6737	Level of Care:	ALF**	Bed Capacity	48
Mailing Address 2800 RABBIT TRAIL	DR		ANKLIN	DMH Licensed	No
WASHINGTON	MO 63090-6737	Region 6		Facility Number	27659
VIENNA POINTE RESIDENTIAL CA	ARE				
112 PARKWAY DR		Telephone	(573) 422-3230	Alzheimer's Unit	No
VIENNA	MO 65582-8003	Level of Care:	RCF	<b>Bed Capacity</b>	48
Mailing Address 112 PARKWAY DR		County MA	ARIES	DMH Licensed	No
VIENNA	MO 65582-8003	Region 6		Facility Number	23333

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VILLA AT BLUE RIDGE, THE		
701 BLUE RIDGE ROAD	<b>Telephone</b> (573) 474-6111	Alzheimer's Unit No
COLUMBIA MO 65201-3734	Level of Care: SNF	<b>Bed Capacity</b> 97
Mailing Address 701 BLUE RIDGE ROAD	County BOONE	<b>DMH Licensed</b> No
COLUMBIA MO 65201-3734	Region 6 Medicare/Medicaid	Facility Number 01706
VILLAGE ASSISTED LIVING		
1701 NW O'BRIEN RD	<b>Telephone</b> (816) 347-2700	Alzheimer's Unit Yes
LEE'S SUMMIT MO 64081-1559	Level of Care: ALF**	<b>Bed Capacity</b> 50
Mailing Address 1701 NW O'BRIEN RD	County JACKSON	<b>DMH Licensed</b> No
LEE'S SUMMIT MO 64081-1559	Region 3	Facility Number 29258
WHILAGE ACCIONED INVINC		
VILLAGE ASSISTED LIVING 1704 NORTHWEST O'BRIEN RD	<b>Telephone</b> (816) 347-2700	Alzheimer's Unit Yes
LEE'S SUMMIT MO 64081-1559	Telephone (816) 347-2700 Level of Care: ALF**	Bed Capacity 172
Mailing Address 1704 NORTHWEST O'BRIEN RD	County JACKSON	DMH Licensed No
LEE'S SUMMIT MO 64081-1559	Region 3	Facility Number 16108
EEES SOMMIN MO 04001-1339	Kegion 5	racinty Number 10108
VILLAGE AT CARROLL PARK, THE		
5301 HARRY TRUMAN DR	<b>Telephone</b> (816) 761-6838	Alzheimer's Unit No
GRANDVIEW MO 64030-1708	Level of Care: ICF	Bed Capacity 93
Mailing Address 5301 HARRY TRUMAN DR	County JACKSON	DMH Licensed Yes
GRANDVIEW MO 64030-1708	Region 3	Facility Number 03157
VILLAGE CARE CENTER, INC		
810 EAST EDWARDS ST	<b>Telephone</b> (660) 562-3515	Alzheimer's Unit No
MARYVILLE MO 64468-2917	Level of Care: RCF*	Bed Capacity 18
Mailing Address 810 EAST EDWARDS ST	County NODAWAY	DMH Licensed No
MARYVILLE MO 64468-2917	Region 4	Facility Number 20361
VILLAGE CARE CENTER, INC 810 EAST EDWARDS ST	<b>Telephone</b> (660) 562-3515	Alzheimer's Unit No
MARYVILLE MO 64468-2917	Telephone (660) 562-3515 Level of Care: SNF	Bed Capacity 46
Mailing Address 810 EAST EDWARDS ST	County NODAWAY	DMH Licensed No
MARYVILLE MO 64468-2917	Region 4 Medicare/Medicaid	Facility Number 20361
MIAKT VILLE MIO 04408-2517	Region + Medicare/Medicaid	racinty Number 20301
VILLAGE WEST, THE		
318 EAST LITTLE BRICK ROAD	<b>Telephone</b> (816) 632-7611	Alzheimer's Unit No
CAMERON MO 64429-1231	Level of Care: RCF*	<b>Bed Capacity</b> 27
Mailing Address 318 EAST LITTLE BRICK RD	County CLINTON	DMH Licensed No
CAMERON MO 64429-1231	Region 4	Facility Number 18104
VIII LACE THE		
VILLAGE, THE 320 EAST LITTLE BRICK RD	<b>Telephone</b> (816) 632-7611	Alzheimer's Unit No
CAMERON MO 64429-1231	Level of Care: RCF*	Bed Capacity 49
Mailing Address 320 EAST LITTLE BRICK RD	County CLINTON	DMH Licensed No
CAMERON MO 64429-1231	•	Facility Number 08945
CAMILACIA 1910 04427-1251	Region 4	racinty Number 08945

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VILLAS OF JACKSON LLC THE			
670 BROADRIDGE DRIVE		<b>Telephone</b> (573) 986-8210	Alzheimer's Unit Yes
JACKSON	MO 63755-3044	Level of Care: ALF**	<b>Bed Capacity</b> 84
Mailing Address 670 BROADRIDGE DR	RIVE	County CAPE GIRARDEAU	<b>DMH Licensed</b> No
JACKSON	MO 63755-3044	Region 2	Facility Number 30623
VINTAGE GARDENS ASSISTED LIVI	NG		
3302 NORTH WOODBINE ROAD		<b>Telephone</b> (816) 279-3330	Alzheimer's Unit Yes
	MO 64505-9323	Level of Care: ALF	Bed Capacity 51
Mailing Address 3302 NORTH WOODB		County BUCHANAN	DMH Licensed No
_	MO 64505-9323	Region 4	Facility Number 22959
5.11.17 3051 211	110 01303 7323	Region	racinty (tuniber 22)3)
MANUTA CE CARRENG A GGICTER I IVI	nyo.		
VINTAGE GARDENS ASSISTED LIVI	IING	T-11 (01.6) 270 2220	A link atom out a Time!
3302 NORTH WOODBINE ROAD	MO (4505 0222	<b>Telephone</b> (816) 279-3330	Alzheimer's Unit No
	MO 64505-9323	Level of Care: ALF**	Bed Capacity 44
Mailing Address 3302 N WOODBINE RO		County BUCHANAN	DMH Licensed No
SAINT JOSEPH	MO 64505-9323	Region 4	Facility Number 22959
NON LOR HELL THICK DE OF ACTA	187		
VOYAGE HEALTHCARE OF MALDE	in		
500 BARRETT DRIVE		<b>Telephone</b> 573 276 3843	Alzheimer's Unit
	MO 63863-1204	Level of Care: RCF	<b>Bed Capacity</b> 96
Mailing Address 500 BARRETT DRIVE		County DUNKLIN	<b>DMH Licensed</b> No
MALDEN	MO 63863-1204	Region 2	Facility Number 06656
VOL ODDINGERELD ACCIONED LIVIN	o H o		
VSL SPRINGFIELD ASSISTED LIVIN	G, LLC	T. I. I. (417) 921 2929	A11. 1. T. '4 N
1401 WEST ELFINDALE STREET		<b>Telephone</b> (417) 831-3828	Alzheimer's Unit No
	MO 65807-1295	Level of Care: ALF	Bed Capacity 50
Mailing Address 1401 WEST ELFINDAL		County GREENE	DMH Licensed No
SPRINGFIELD	MO 65807-1295	Region 1	Facility Number 32492
WAGNER RESIDENTIAL CARE, INC			
320 N CHAMBER DR		<b>Telephone</b> (573) 783-4511	Alzheimer's Unit No
	MO 63645-7947	Level of Care: RCF	Bed Capacity 40
	WIO 03043-7947		
Mailing Address 320 N CHAMBER DR	MO (2645 7047	County MADISON	DMH Licensed Yes
FREDERICKTOWN	MO 63645-7947	Region 2	Facility Number 28451
WALNUT STREET ASSISTED LIVING	Ç.		
404 WALNUT ST	<u>.</u>	<b>Telephone</b> (573) 996-4283	Alzheimer's Unit No
	MO 63935-1420	Level of Care: ALF	Bed Capacity 35
	1VIO 03733-1420		
Mailing Address 404 WALNUT ST	MO (2025 1420	·	
DONIPHAN	MO 63935-1420	Region 2	Facility Number 08354
WARRENSBURG MANOR CARE CEN	VTER		
400 CARE CENTER DR		<b>Telephone</b> (660) 747-2216	Alzheimer's Unit No
	MO 64093-3100	Level of Care: SNF	Bed Capacity 88
Mailing Address 400 CARE CENTER DI			
Mailing Address 400 CARE CENTER DI WARRENSBURG		County JOHNSON Region 3 Medicare/Medicaid	DMH Licensed No Facility Number 08383

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WARRENTON MANOR	
65 STATE HIGHWAY AA	Telephone (636) 456-8700 Alzheimer's Unit Yes
WRIGHT CITY MO 63383-330	1 Level of Care: SNF Bed Capacity 120
Mailing Address 65 STATE HIGHWAY AA	County WARREN DMH Licensed No.
WRIGHT CITY MO 63390-330	1 Region 6 Medicare/Medicaid Facility Number 02505
WADGAW HEAT TH AND DEHADH IT ATION CENT	TED.
WARSAW HEALTH AND REHABILITATION CENT 1609 SUNCHASE DR	
WARSAW MO 65355-305	•
Mailing Address 1609 SUNCHASE DR	County BENTON DMH Licensed No.
WARSAW MO 65355-305	•
WARSAW MO 05355-300	7 Region 6 Medicare/Medicaid Facility Number 1324.
WATERFORD LADIES HOME	
500 NW VESPER ST	Telephone (816) 228-6337 Alzheimer's Unit No
BLUE SPRINGS MO 64014-274	4 Level of Care: RCF Bed Capacity 27
Mailing Address 500 NW VESPER ST	County JACKSON DMH Licensed No.
BLUE SPRINGS MO 64014-274	4 Region 3 Facility Number 13774
WATTE STREET MANOR	
WATTS STREET MANOR	TO 1 1 (572) 421 4974 All 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
301 WATTS ST PARK HILLS MO 63601-183	Telephone (573) 431-4874 Alzheimer's Unit No.  Level of Care: RCF* Bed Capacity 16
Mailing Address PO BOX 481 PARK HILLS MO 63601-048	•
PARK HILLS MO 05001-040	1 Region 2 Facility Number 06579
WEBB CITY HEALTH AND REHABILITATION CE	NTER
2077 STADIUM DR	<b>Telephone</b> (417) 673-1933 <b>Alzheimer's Unit</b> Yes
WEBB CITY MO 64870-974	3 Level of Care: SNF Bed Capacity 120
Mailing Address 2077 STADIUM DR	County JASPER DMH Licensed No.
WEBB CITY MO 64870-974	3 Region <sup>1</sup> Medicare/Medicaid Facility Number 12286
WEBCO MANOR	
1687 W WASHINGTON ST	Telephone (417) 859-5144 Alzheimer's Unit No
MARSHFIELD MO 65706-232	•
Mailing Address 1687 W WASHINGTON ST	County WEBSTER DMH Licensed No.
MARSHFIELD MO 65706-232	·
WEDNIGOD AGGIGINA ATTIVICATE OF	
WEBWOOD ASSISTED LIVING, LLC	(417) 451 2007
1640 WALDO HATLER DRIVE	Telephone (417) 451-2997 Alzheimer's Unit NC
NEOSHO MO 64850-805	
Mailing Address 1640 WALDO HATLER DRIVE	County NEWTON DMH Licensed No
NEOSHO MO 64850-805	9 Region 1 Facility Number 31265
WEDGEWOOD GARDENS	
17996 BUSINESS 13	<b>Telephone</b> (417) 272-6666 <b>Alzheimer's Unit</b> Yes
REEDS SPRING MO 65737-966	3 Level of Care: ALF** Bed Capacity 46
Mailing Address 17996 BUSINESS 13	County STONE DMH Licensed No.
REEDS SPRING MO 65737-966	3 Region 1 Facility Number 20615

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WELLINGTON SENIOR LIVING,T	нЕ			
1051 KENT STREET		<b>Telephone</b> (816) 222-0379	Alzheimer's Unit	Yes
LIBERTY	MO 64068-2257	Level of Care: ALF**	Bed Capacity	66
Mailing Address 1051 KENT STREET		County CLAY	DMH Licensed	No
LIBERTY	MO 64068-2257	Region 4	Facility Number	33016
WELLSVILLE HEALTH CARE CE	NTER			
250 E LOCUST	TIEN.	<b>Telephone</b> (573) 684-2002	Alzheimer's Unit	No
WELLSVILLE	MO 63384-1422	Level of Care: SNF	Bed Capacity	112
Mailing Address 250 E LOCUST	110 03301 1122	County MONTGOMERY	DMH Licensed	No
WELLSVILLE	MO 63384-1422	Region 6 Medicare/Medicaid	Facility Number	02740
WEBES VIELE	110 03301 1122	region o Medical e/Medicald	racinty runiber	02740
WEST PINE GROUP HOME				
4232 WEST PINE BLVD		<b>Telephone</b> (314) 531-9450	Alzheimer's Unit	No
SAINT LOUIS	MO 63108-2840	Level of Care: RCF	Bed Capacity	9
Mailing Address 4232 WEST PINE BI		County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS	MO 63108-2840	Region 7	Facility Number	05948
WEST VUE NURSING AND REHAE	BILITATION CENTER			
210 DAVIS DR		<b>Telephone</b> (417) 256-2152	Alzheimer's Unit	Yes
WEST PLAINS	MO 65775-2241	Level of Care: SNF	Bed Capacity	130
Mailing Address 210 DAVIS DR		County HOWELL	DMH Licensed	No
WEST PLAINS	MO 65775-2241	Region 2 Medicare/Medicaid	Facility Number	21733
WESTEROOF CARE CENTED IN	7			
WESTBROOK CARE CENTER, INC		Talanhana (916) 629 2222	Alahaiman'a Unit	No
401 S PLATTE CLAY WAY	MO (40(0 7714	Telephone (816) 628-2222 Level of Care: RCF*	Alzheimer's Unit	No
KEARNEY  Moiling Address 401 S. DI ATTE CLA	MO 64060-7714		Bed Capacity  DMH Licensed	27 No
Mailing Address 401 S PLATTE CLA KEARNEY	MO 64060-7714	·	Facility Number	
REARINE I	WIO 04000-7714	Region 4	racinty Number	19757
WESTBROOK TERRACE - ASSIST	ED LIVING BY AMERICARE			
3335 NORTH TEN MILE DR		<b>Telephone</b> (573) 635-2600	Alzheimer's Unit	No
JEFFERSON CITY	MO 65109-0528	Level of Care: ALF**	Bed Capacity	36
Mailing Address 3335 NORTH TEN N	MILE DR	County COLE	DMH Licensed	No
JEFFERSON CITY	MO 65109-0528	Region 6	Facility Number	20440
WESTBURY SENIOR LIVING THE				
550 STONE VALLEY PARKWAY		<b>Telephone</b> (573) 818-7030	Alzheimer's Unit	Yes
COLUMBIA	MO 65203-5567	Level of Care: ALF**	Bed Capacity	66
Mailing Address 550 STONE VALLE	Y PARKWAY	County BOONE	DMH Licensed	No
COLUMBIA	MO 65203-5567	Region 6	Facility Number	32666
WESTCHESTED HOUSE THE				
WESTCHESTER HOUSE, THE 550 WHITE RD		<b>Telephone</b> (314) 469-1200	Alzheimer's Unit	No
CHESTERFIELD	MO 63017-2316	Level of Care: SNF	Bed Capacity	159
Mailing Address 550 WHITE RD	110 03017 2310	County SAINT LOUIS COUNTY	DMH Licensed	No
CHESTERFIELD	MO 63017-2316	Region 7 Medicare/Medicaid		08474
CITED LEVI ILLED	1410 03017-2310	Region / Medicare/Medicald	racinty runner	004/4

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WESTGATE			
3130 JOHN DUFFY DR	<b>Telephone</b> (417) 553-3688	Alzheimer's Unit	Yes
JOPLIN MO 64804-1569	Level of Care: SNF	Bed Capacity	120
Mailing Address 3130 JOHN DUFFY DR	County JASPER	DMH Licensed	No
JOPLIN MO 64804-1569	Region 1 Medicare/Medicaid	Facility Number	31754
JOPLIN 1910 04004-1309	Region 1 Medicare/Medicaid	racinty Number	31/34
WESTPORT ESTATES - ASSISTED LIVING BY AMERICARE			
904 APACHE DR	<b>Telephone</b> (660) 886-5500	Alzheimer's Unit	Yes
MARSHALL MO 65340-2900	Level of Care: ALF**	Bed Capacity	62
Mailing Address 904 APACHE DR	County SALINE	DMH Licensed	No
MARSHALL MO 65340-2900	Region 5	Facility Number	16202
WESTVIEW AT ELLISVILLE ASSISTED LIVING			
27 REINKE RD	<b>Telephone</b> (636) 527-5554	Alzheimer's Unit	Yes
ELLISVILLE MO 63021-4734	Level of Care: ALF**	<b>Bed Capacity</b>	99
Mailing Address 27 REINKE RD	County SAINT LOUIS COUNTY	DMH Licensed	No
ELLISVILLE MO 63021-4734	Region 7	Facility Number	28184
WESTVIEW NURSING HOME			
301 WEST DUNLOP ST	<b>Telephone</b> (573) 267-3920	Alzheimer's Unit	No
CENTER MO 63436-2267	Level of Care: SNF	<b>Bed Capacity</b>	60
Mailing Address 301 WEST DUNLOP ST	County RALLS	DMH Licensed	No
CENTER MO 63436-2267	Region 5 Medicare/Medicaid	Facility Number	15634
WESTWOOD HILLS HEALTH & REHABILITATION CENTE	R		
WESTWOOD HILLS HEALTH & REHABILITATION CENTE 3100 WARRIOR LANE	<b>Telephone</b> (573) 785-0851	Alzheimer's Unit	No
		Alzheimer's Unit Bed Capacity	No 132
3100 WARRIOR LANE	<b>Telephone</b> (573) 785-0851		
3100 WARRIOR LANE POPLAR BLUFF MO 63901-8686	Telephone (573) 785-0851 Level of Care: SNF	<b>Bed Capacity</b>	132
3100 WARRIOR LANE POPLAR BLUFF MO 63901-8686  Mailing Address 3100 WARRIOR LANE POPLAR BLUFF MO 63901-8686	Telephone (573) 785-0851 Level of Care: SNF County BUTLER Region 2 Medicare/Medicaid	Bed Capacity DMH Licensed	132 No
3100 WARRIOR LANE POPLAR BLUFF MO 63901-8686 Mailing Address 3100 WARRIOR LANE POPLAR BLUFF MO 63901-8686  WEXFORD PLACE ASSISTED LIVING AND MEMORY SUPP	Telephone (573) 785-0851 Level of Care: SNF County BUTLER Region 2 Medicare/Medicaid  ORT BY SENIOR STAR	Bed Capacity DMH Licensed Facility Number	132 No 08512
3100 WARRIOR LANE POPLAR BLUFF MO 63901-8686  Mailing Address 3100 WARRIOR LANE POPLAR BLUFF MO 63901-8686  WEXFORD PLACE ASSISTED LIVING AND MEMORY SUPP 6460 NORTH COSBY AVE	Telephone (573) 785-0851 Level of Care: SNF County BUTLER Region 2 Medicare/Medicaid  ORT BY SENIOR STAR Telephone (816) 743-4259	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	132 No 08512 Yes
3100 WARRIOR LANE POPLAR BLUFF MO 63901-8686  Mailing Address 3100 WARRIOR LANE POPLAR BLUFF MO 63901-8686  WEXFORD PLACE ASSISTED LIVING AND MEMORY SUPP 6460 NORTH COSBY AVE KANSAS CITY MO 64151-2377	Telephone (573) 785-0851 Level of Care: SNF County BUTLER Region 2 Medicare/Medicaid  ORT BY SENIOR STAR Telephone (816) 743-4259 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	132 No 08512 Yes 98
3100 WARRIOR LANE POPLAR BLUFF MO 63901-8686  Mailing Address 3100 WARRIOR LANE POPLAR BLUFF MO 63901-8686  WEXFORD PLACE ASSISTED LIVING AND MEMORY SUPP 6460 NORTH COSBY AVE	Telephone (573) 785-0851 Level of Care: SNF County BUTLER Region 2 Medicare/Medicaid  ORT BY SENIOR STAR Telephone (816) 743-4259	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	132 No 08512 Yes
3100 WARRIOR LANE POPLAR BLUFF MO 63901-8686  Mailing Address 3100 WARRIOR LANE POPLAR BLUFF MO 63901-8686  WEXFORD PLACE ASSISTED LIVING AND MEMORY SUPP 6460 NORTH COSBY AVE KANSAS CITY MO 64151-2377  Mailing Address 6460 NORTH COSBY AVE KANSAS CITY MO 64151-2377	Telephone (573) 785-0851 Level of Care: SNF County BUTLER Region 2 Medicare/Medicaid  ORT BY SENIOR STAR Telephone (816) 743-4259 Level of Care: ALF** County PLATTE	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	132 No 08512 Yes 98 No
3100 WARRIOR LANE POPLAR BLUFF MO 63901-8686  Mailing Address 3100 WARRIOR LANE POPLAR BLUFF MO 63901-8686  WEXFORD PLACE ASSISTED LIVING AND MEMORY SUPP 6460 NORTH COSBY AVE KANSAS CITY MO 64151-2377  Mailing Address 6460 NORTH COSBY AVE KANSAS CITY MO 64151-2377  WHISPERING OAKS RCF II, LLC	Telephone (573) 785-0851 Level of Care: SNF County BUTLER Region 2 Medicare/Medicaid  ORT BY SENIOR STAR Telephone (816) 743-4259 Level of Care: ALF** County PLATTE Region 4	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	132 No 08512 Yes 98 No 28861
3100 WARRIOR LANE POPLAR BLUFF MO 63901-8686  Mailing Address 3100 WARRIOR LANE POPLAR BLUFF MO 63901-8686  WEXFORD PLACE ASSISTED LIVING AND MEMORY SUPP 6460 NORTH COSBY AVE KANSAS CITY MO 64151-2377  Mailing Address 6460 NORTH COSBY AVE KANSAS CITY MO 64151-2377  WHISPERING OAKS RCF II, LLC 203 NORTH B ST	Telephone (573) 785-0851 Level of Care: SNF County BUTLER Region 2 Medicare/Medicaid  ORT BY SENIOR STAR Telephone (816) 743-4259 Level of Care: ALF** County PLATTE Region 4  Telephone (573) 686-4490	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	132 No 08512 Yes 98 No 28861
3100 WARRIOR LANE POPLAR BLUFF MO 63901-8686  Mailing Address 3100 WARRIOR LANE POPLAR BLUFF MO 63901-8686  WEXFORD PLACE ASSISTED LIVING AND MEMORY SUPP 6460 NORTH COSBY AVE KANSAS CITY MO 64151-2377  Mailing Address 6460 NORTH COSBY AVE KANSAS CITY MO 64151-2377  WHISPERING OAKS RCF II, LLC 203 NORTH B ST POPLAR BLUFF MO 63901-5413	Telephone (573) 785-0851 Level of Care: SNF County BUTLER Region 2 Medicare/Medicaid  ORT BY SENIOR STAR Telephone (816) 743-4259 Level of Care: ALF** County PLATTE Region 4  Telephone (573) 686-4490 Level of Care: RCF*	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	132 No 08512 Yes 98 No 28861
3100 WARRIOR LANE POPLAR BLUFF MO 63901-8686  Mailing Address 3100 WARRIOR LANE POPLAR BLUFF MO 63901-8686  WEXFORD PLACE ASSISTED LIVING AND MEMORY SUPP 6460 NORTH COSBY AVE KANSAS CITY MO 64151-2377  Mailing Address 6460 NORTH COSBY AVE KANSAS CITY MO 64151-2377  WHISPERING OAKS RCF II, LLC 203 NORTH B ST POPLAR BLUFF MO 63901-5413  Mailing Address 203 NORTH B ST	Telephone (573) 785-0851 Level of Care: SNF County BUTLER Region 2 Medicare/Medicaid  ORT BY SENIOR STAR Telephone (816) 743-4259 Level of Care: ALF** County PLATTE Region 4  Telephone (573) 686-4490 Level of Care: RCF* County BUTLER	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	132 No 08512 Yes 98 No 28861 No 45 Yes
3100 WARRIOR LANE POPLAR BLUFF MO 63901-8686  Mailing Address 3100 WARRIOR LANE POPLAR BLUFF MO 63901-8686  WEXFORD PLACE ASSISTED LIVING AND MEMORY SUPP 6460 NORTH COSBY AVE KANSAS CITY MO 64151-2377  Mailing Address 6460 NORTH COSBY AVE KANSAS CITY MO 64151-2377  WHISPERING OAKS RCF II, LLC 203 NORTH B ST POPLAR BLUFF MO 63901-5413	Telephone (573) 785-0851 Level of Care: SNF County BUTLER Region 2 Medicare/Medicaid  ORT BY SENIOR STAR Telephone (816) 743-4259 Level of Care: ALF** County PLATTE Region 4  Telephone (573) 686-4490 Level of Care: RCF*	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	132 No 08512 Yes 98 No 28861
3100 WARRIOR LANE POPLAR BLUFF MO 63901-8686  Mailing Address 3100 WARRIOR LANE POPLAR BLUFF MO 63901-8686  WEXFORD PLACE ASSISTED LIVING AND MEMORY SUPP 6460 NORTH COSBY AVE KANSAS CITY MO 64151-2377  Mailing Address 6460 NORTH COSBY AVE KANSAS CITY MO 64151-2377  WHISPERING OAKS RCF II, LLC 203 NORTH B ST POPLAR BLUFF MO 63901-5413  Mailing Address 203 NORTH B ST POPLAR BLUFF MO 63901-5413  WHISPERING PINES SENIOR LIVING	Telephone (573) 785-0851 Level of Care: SNF County BUTLER Region 2 Medicare/Medicaid  ORT BY SENIOR STAR Telephone (816) 743-4259 Level of Care: ALF** County PLATTE Region 4  Telephone (573) 686-4490 Level of Care: RCF* County BUTLER Region 2	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	132 No 08512 Yes 98 No 28861 No 45 Yes 16751
3100 WARRIOR LANE POPLAR BLUFF MO 63901-8686  Mailing Address 3100 WARRIOR LANE POPLAR BLUFF MO 63901-8686  WEXFORD PLACE ASSISTED LIVING AND MEMORY SUPP 6460 NORTH COSBY AVE KANSAS CITY MO 64151-2377  Mailing Address 6460 NORTH COSBY AVE KANSAS CITY MO 64151-2377  WHISPERING OAKS RCF II, LLC 203 NORTH B ST POPLAR BLUFF MO 63901-5413  Mailing Address 203 NORTH B ST POPLAR BLUFF MO 63901-5413  WHISPERING PINES SENIOR LIVING 4904 EAST WELLRIDGE LN	Telephone (573) 785-0851 Level of Care: SNF County BUTLER Region 2 Medicare/Medicaid  ORT BY SENIOR STAR Telephone (816) 743-4259 Level of Care: ALF** County PLATTE Region 4  Telephone (573) 686-4490 Level of Care: RCF* County BUTLER Region 2  Telephone (417) 781-0099	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	132 No 08512 Yes 98 No 28861 No 45 Yes 16751
3100 WARRIOR LANE POPLAR BLUFF MO 63901-8686  Mailing Address 3100 WARRIOR LANE POPLAR BLUFF MO 63901-8686  WEXFORD PLACE ASSISTED LIVING AND MEMORY SUPP 6460 NORTH COSBY AVE KANSAS CITY MO 64151-2377  Mailing Address 6460 NORTH COSBY AVE KANSAS CITY MO 64151-2377  WHISPERING OAKS RCF II, LLC 203 NORTH B ST POPLAR BLUFF MO 63901-5413  Mailing Address 203 NORTH B ST POPLAR BLUFF MO 63901-5413  WHISPERING PINES SENIOR LIVING 4904 EAST WELLRIDGE LN JOPLIN MO 64801-8793	Telephone (573) 785-0851 Level of Care: SNF County BUTLER Region 2 Medicare/Medicaid  ORT BY SENIOR STAR Telephone (816) 743-4259 Level of Care: ALF** County PLATTE Region 4  Telephone (573) 686-4490 Level of Care: RCF* County BUTLER Region 2  Telephone (417) 781-0099 Level of Care: RCF*	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	132 No 08512 Yes 98 No 28861 No 45 Yes 16751
3100 WARRIOR LANE POPLAR BLUFF MO 63901-8686  Mailing Address 3100 WARRIOR LANE POPLAR BLUFF MO 63901-8686  WEXFORD PLACE ASSISTED LIVING AND MEMORY SUPP 6460 NORTH COSBY AVE KANSAS CITY MO 64151-2377  Mailing Address 6460 NORTH COSBY AVE KANSAS CITY MO 64151-2377  WHISPERING OAKS RCF II, LLC 203 NORTH B ST POPLAR BLUFF MO 63901-5413  Mailing Address 203 NORTH B ST POPLAR BLUFF MO 63901-5413  WHISPERING PINES SENIOR LIVING 4904 EAST WELLRIDGE LN	Telephone (573) 785-0851 Level of Care: SNF County BUTLER Region 2 Medicare/Medicaid  ORT BY SENIOR STAR Telephone (816) 743-4259 Level of Care: ALF** County PLATTE Region 4  Telephone (573) 686-4490 Level of Care: RCF* County BUTLER Region 2  Telephone (417) 781-0099	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	132 No 08512 Yes 98 No 28861 No 45 Yes 16751

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WHITE OAK ASSISTED LIVING					
1515 WEST WHITE OAK	0 - 11070 0777	Telephone	(816) 254-3500	Alzheimer's Unit	No
	O 64050-2557	Level of Care:	ALF**	Bed Capacity	78 N
Mailing Address 1515 WEST WHITE OAK		·	KSON	DMH Licensed	No
INDEPENDENCE M	O 64050-2557	Region 3		Facility Number	06604
WILD-KAT ESTATES, LLC					
300 WEST FAIRVIEW STREET		Telephone	(660) 535-2011	Alzheimer's Unit	No
	O 64463-9606	Level of Care:	ALF**	Bed Capacity	24
Mailing Address 300 WEST FAIRVIEW ST			VTRY	DMH Licensed	No
	O 64463-9606	Region 4	VIIVI	Facility Number	04305
KING CITT	0 04403 7000	Region +		racinty Number	04303
WILDWOOD SENIOR LIVING THE					
3002 SOUTH JOHN DUFFY DRIVE		Telephone	(417) 623-2233	Alzheimer's Unit	Yes
JOPLIN M	O 64804-1656	Level of Care:	ALF**	<b>Bed Capacity</b>	74
Mailing Address 3002 SOUTH JOHN DUF	FY DRIVE	County JAS	PER	DMH Licensed	No
JOPLIN M	O 64804-1656	Region 1		Facility Number	31370
WILLARD CARE CENTER					
400 WEST WALNUT LN		Telephone	(417) 742-3593	Alzheimer's Unit	Yes
	O 65781-9432	Level of Care:	SNF	Bed Capacity	66
Mailing Address 400 W WALNUT LN			EENE	DMH Licensed	No
WILLARD M	O 65781-9432	Region 1 N	Aedicare/Medicaid	Facility Number	16393
WILLOW BROOKE - ASSISTED LIVING	G BY AMERICARE				
WILLOW BROOKE - ASSISTED LIVING #1 NORTH POTOMAC CT	G BY AMERICARE	Telephone	(636) 583-2799	Alzheimer's Unit	No
#1 NORTH POTOMAC CT	G BY AMERICARE O 63084-1113	Telephone Level of Care:	(636) 583-2799 ALF**	Alzheimer's Unit Bed Capacity	No 50
#1 NORTH POTOMAC CT	O 63084-1113	Level of Care:	* *		
#1 NORTH POTOMAC CT UNION M Mailing Address 1 NORTH POTOMAC C	O 63084-1113	Level of Care:	ALF**	<b>Bed Capacity</b>	50
#1 NORTH POTOMAC CT UNION M Mailing Address 1 NORTH POTOMAC CT UNION M	O 63084-1113 Г	Level of Care: County FRA	ALF**	Bed Capacity DMH Licensed	50 No
#1 NORTH POTOMAC CT UNION M Mailing Address 1 NORTH POTOMAC CT UNION M WILLOW CARE NURSING HOME	O 63084-1113 Г	Level of Care: County FRA Region 6	ALF** NKLIN	Bed Capacity DMH Licensed Facility Number	50 No 13596
#1 NORTH POTOMAC CT UNION M Mailing Address 1 NORTH POTOMAC CT UNION M WILLOW CARE NURSING HOME 2646 STATE ROUTE 76	O 63084-1113 T O 63084-1113	Level of Care: County FRA Region 6 Telephone	ALF** NKLIN  (417) 469-3152	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	50 No 13596 Yes
#1 NORTH POTOMAC CT UNION M Mailing Address 1 NORTH POTOMAC CT UNION M  WILLOW CARE NURSING HOME 2646 STATE ROUTE 76 WILLOW SPRINGS M	O 63084-1113 Г	Level of Care: County FRA Region 6  Telephone Level of Care:	ALF** NKLIN  (417) 469-3152 SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	50 No 13596 Yes 105
#1 NORTH POTOMAC CT UNION M Mailing Address 1 NORTH POTOMAC CT UNION M WILLOW CARE NURSING HOME 2646 STATE ROUTE 76 WILLOW SPRINGS M Mailing Address PO BOX 309	O 63084-1113  T O 63084-1113  O 65793-8254	Level of Care: County FRA Region 6  Telephone Level of Care: County HOV	ALF** NKLIN  (417) 469-3152  SNF WELL	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	50 No 13596 Yes 105 No
#1 NORTH POTOMAC CT UNION M Mailing Address 1 NORTH POTOMAC C' UNION M  WILLOW CARE NURSING HOME 2646 STATE ROUTE 76 WILLOW SPRINGS M Mailing Address PO BOX 309	O 63084-1113 T O 63084-1113	Level of Care: County FRA Region 6  Telephone Level of Care: County HOV	ALF** NKLIN  (417) 469-3152 SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	50 No 13596 Yes 105
#1 NORTH POTOMAC CT UNION M Mailing Address 1 NORTH POTOMAC CT UNION M WILLOW CARE NURSING HOME 2646 STATE ROUTE 76 WILLOW SPRINGS M Mailing Address PO BOX 309	O 63084-1113  T O 63084-1113  O 65793-8254	Level of Care: County FRA Region 6  Telephone Level of Care: County HOV	ALF** NKLIN  (417) 469-3152  SNF WELL	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	50 No 13596 Yes 105 No
#1 NORTH POTOMAC CT UNION M Mailing Address 1 NORTH POTOMAC CT UNION M WILLOW CARE NURSING HOME 2646 STATE ROUTE 76 WILLOW SPRINGS M Mailing Address PO BOX 309 WILLOW SPRINGS M	O 63084-1113  T O 63084-1113  O 65793-8254	Level of Care: County FRA Region 6  Telephone Level of Care: County HOV	ALF** NKLIN  (417) 469-3152  SNF WELL	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	50 No 13596 Yes 105 No
#1 NORTH POTOMAC CT UNION M Mailing Address 1 NORTH POTOMAC CT UNION M  WILLOW CARE NURSING HOME 2646 STATE ROUTE 76 WILLOW SPRINGS M Mailing Address PO BOX 309 WILLOW SPRINGS M  WILLOW WEST APARTMENTS 2644 STATE ROUTE 76	O 63084-1113  T O 63084-1113  O 65793-8254	Level of Care: County FRA Region 6  Telephone Level of Care: County HOV Region 2 M	ALF** NKLIN  (417) 469-3152  SNF WELL  Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	50 No 13596 Yes 105 No 08614
#1 NORTH POTOMAC CT UNION M Mailing Address 1 NORTH POTOMAC CT UNION M  WILLOW CARE NURSING HOME 2646 STATE ROUTE 76 WILLOW SPRINGS M Mailing Address PO BOX 309 WILLOW SPRINGS M  WILLOW WEST APARTMENTS 2644 STATE ROUTE 76	O 63084-1113  T O 63084-1113  O 65793-8254  O 65793-0309	Level of Care: County FRA Region 6  Telephone Level of Care: County HOV Region 2 M  Telephone Level of Care:	ALF** NKLIN  (417) 469-3152  SNF WELL  Medicare/Medicaid  (417) 469-3152	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	50 No 13596 Yes 105 No 08614
#1 NORTH POTOMAC CT UNION M Mailing Address 1 NORTH POTOMAC CT UNION M  WILLOW CARE NURSING HOME 2646 STATE ROUTE 76 WILLOW SPRINGS M Mailing Address PO BOX 309 WILLOW SPRINGS M  WILLOW SPRINGS M  WILLOW WEST APARTMENTS 2644 STATE ROUTE 76 WILLOW SPRINGS M Mailing Address PO BOX 309	O 63084-1113  T O 63084-1113  O 65793-8254  O 65793-0309	Level of Care: County FRA Region 6  Telephone Level of Care: County HOV Region 2 M  Telephone Level of Care:	ALF** NKLIN  (417) 469-3152 SNF WELL  Medicare/Medicaid  (417) 469-3152 ALF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	50 No 13596 Yes 105 No 08614
#1 NORTH POTOMAC CT UNION M Mailing Address 1 NORTH POTOMAC C' UNION M  WILLOW CARE NURSING HOME 2646 STATE ROUTE 76 WILLOW SPRINGS M Mailing Address PO BOX 309 WILLOW SPRINGS M  WILLOW WEST APARTMENTS 2644 STATE ROUTE 76 WILLOW SPRINGS M Mailing Address PO BOX 309 WILLOW SPRINGS M Mailing Address PO BOX 309 WILLOW SPRINGS M Mailing Address PO BOX 309 WILLOW SPRINGS M MILLOW SPRINGS M M MILLOW SPRINGS M M MILLOW SPRINGS M M M M M M M M M M M M M M M M M M M	O 63084-1113  T O 63084-1113  O 65793-8254  O 65793-0309  O 65793-0309	Level of Care: County FRA Region 6  Telephone Level of Care: County HOV Region 2 M  Telephone Level of Care: County HOV	ALF** NKLIN  (417) 469-3152 SNF WELL  Medicare/Medicaid  (417) 469-3152 ALF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	50 No 13596 Yes 105 No 08614
#1 NORTH POTOMAC CT UNION M Mailing Address 1 NORTH POTOMAC CT UNION M  WILLOW CARE NURSING HOME 2646 STATE ROUTE 76 WILLOW SPRINGS M Mailing Address PO BOX 309 WILLOW SPRINGS M  WILLOW WEST APARTMENTS 2644 STATE ROUTE 76 WILLOW SPRINGS M Mailing Address PO BOX 309 WILLOW SPRINGS M  WILLOW SPRINGS M  Mailing Address PO BOX 309 WILLOW SPRINGS M  W  W  WILLOW SPRINGS M  W  W  W  W  W  W  W  W  W  W  W  W  W	O 63084-1113  T O 63084-1113  O 65793-8254  O 65793-0309  O 65793-0309	Level of Care: County FRA Region 6  Telephone Level of Care: County HOV Region 2 M  Telephone Level of Care: County HOV Region 2	ALF** NKLIN  (417) 469-3152 SNF WELL  Medicare/Medicaid  (417) 469-3152 ALF WELL	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	50 No 13596 Yes 105 No 08614
#1 NORTH POTOMAC CT UNION M Mailing Address 1 NORTH POTOMAC CT UNION M  WILLOW CARE NURSING HOME 2646 STATE ROUTE 76 WILLOW SPRINGS M Mailing Address PO BOX 309 WILLOW SPRINGS M  WILLOW SPRINGS M  WILLOW WEST APARTMENTS 2644 STATE ROUTE 76 WILLOW SPRINGS M Mailing Address PO BOX 309 WILLOW SPRINGS M  W  W  WILLOW SPRINGS M  W  W  WILLOW SPRINGS M  W  W  W  W  W  W  W  W  W  W  W  W  W	O 63084-1113  T O 63084-1113  O 65793-8254  O 65793-0309  O 65793-0309  BILITATION	Level of Care: County FRA Region 6  Telephone Level of Care: County HOV Region 2 M  Telephone Level of Care: County HOV Region 2	ALF** NKLIN  (417) 469-3152 SNF WELL  Medicare/Medicaid  (417) 469-3152 ALF WELL  (314) 838-2211	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	50 No 13596 Yes 105 No 08614 No 08614
#1 NORTH POTOMAC CT UNION M Mailing Address 1 NORTH POTOMAC CT UNION M  WILLOW CARE NURSING HOME 2646 STATE ROUTE 76 WILLOW SPRINGS M Mailing Address PO BOX 309 WILLOW SPRINGS M  WILLOW SPRINGS M  WILLOW SPRINGS M  Mailing Address PO BOX 309 WILLOW SPRINGS M  WILLOW SPRINGS M  Mailing Address PO BOX 309 WILLOW SPRINGS M  W  W  W  W  W  W  W  W  W  W  W  W  W	O 63084-1113  T O 63084-1113  O 65793-8254  O 65793-0309  O 65793-0309  BILITATION  O 63031-6716	Level of Care: County FRA Region 6  Telephone Level of Care: County HOV Region 2 M  Telephone Level of Care: County HOV Region 2	ALF** NKLIN  (417) 469-3152 SNF WELL  Medicare/Medicaid  (417) 469-3152 ALF WELL  (314) 838-2211 SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	50 No 13596 Yes 105 No 08614 No 08614
#1 NORTH POTOMAC CT UNION M Mailing Address 1 NORTH POTOMAC CT UNION M  WILLOW CARE NURSING HOME 2646 STATE ROUTE 76 WILLOW SPRINGS M Mailing Address PO BOX 309 WILLOW SPRINGS M  WILLOW SPRINGS M  WILLOW SPRINGS M  Mailing Address PO BOX 309 WILLOW SPRINGS M  WILLOW SPRINGS M  Mailing Address PO BOX 309 WILLOW SPRINGS M  MILLOW SPRINGS M  M  MILLOW SPRINGS M  M  MILLOW SPRINGS M  M  MILLOW SPRINGS M  M  M  MILLOW SPRINGS M  M  M  M  M  M  M  M  M  M  M  M  M	O 63084-1113  T O 63084-1113  O 65793-8254  O 65793-0309  O 65793-0309  BILITATION  O 63031-6716	Level of Care: County FRA Region 6  Telephone Level of Care: County HOV Region 2 M  Telephone Level of Care: County HOV Region 2	ALF** NKLIN  (417) 469-3152 SNF WELL  Medicare/Medicaid  (417) 469-3152 ALF WELL  (314) 838-2211	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	50 No 13596 Yes 105 No 08614 No 08614

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<sup>\*</sup> Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

<sup>\*\*</sup> Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

WILSHIRE AT LAKEWOOD REHA	B CENTER			
600 NE MEADOWVIEW DR		<b>Telephone</b> (816) 554-9866	Alzheimer's Unit	No
LEE'S SUMMIT	MO 64064-1983	Level of Care: SNF	Bed Capacity	170
Mailing Address 600 NE MEADOWV	IEW DR	<b>County</b> JACKSON	DMH Licensed	No
LEE'S SUMMIT	MO 64064-1983	Region 3 Medicare/Medicaid	Facility Number	22471
WILSON'S CREEK NURSING & RE	HAR			
3403 WEST MT VERNON	MAD	<b>Telephone</b> (417) 864-5600	Alzheimer's Unit	Yes
SPRINGFIELD	MO 65802-5241	Level of Care: SNF	Bed Capacity	172
Mailing Address 3403 WEST MT VER		County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65802-5241	Region 1 Medicare/Medicaid	Facility Number	05579
SI KII (GI IELE)	110 03002 3211	region 1 Medical e/Medicald	racinty rumber	03317
WINCHESTER NURSING CENTER	, INC			
400 WINCHESTER DRIVE		<b>Telephone</b> (573) 293-6702	Alzheimer's Unit	No
BERNIE	MO 63822-7500	Level of Care: SNF	Bed Capacity	60
Mailing Address PO BOX 760		County STODDARD	DMH Licensed	No
BERNIE	MO 63822-0760	Region 2 Medicare/Medicaid	Facility Number	31391
WINCHESTER PLACE ASSISTED I	LIVING, LLC			
404 WINCHESTER ROAD		<b>Telephone</b> (573) 293-6705	Alzheimer's Unit	NO
BERNIE	MO 63822-7500	Level of Care: ALF**	Bed Capacity	38
Mailing Address 404 WINCHESTER I	ROAD	County STODDARD	DMH Licensed	No
BERNIE	MO 63822-7500	Region 2	Facility Number	31391
WANTED THE LEAD THE COLD	TERRAL C			
WINDEMERE HEALTHCARE CEN	TERLLC	TO 1 1 (01.6) 741 0752	A1 1 * 1 TT */	NO
3100 NORTH WEST VIVION RD	140 (4150 040)	<b>Telephone</b> (816) 741-0753	Alzheimer's Unit	NO
RIVERSIDE	MO 64150-9436	Level of Care: RCF	Bed Capacity	65 N
Mailing Address 3100 NORTH WEST		County PLATTE	DMH Licensed	No
RIVERSIDE	MO 64150-9436	Region 4	Facility Number	08668
WINDSOR ESTATES OF ST CHARL	LES			
2150 WEST RANDOLPH ST		<b>Telephone</b> (636) 946-4966	Alzheimer's Unit	No
SAINT CHARLES	MO 63301-0894	Level of Care: SNF	Bed Capacity	66
Mailing Address 2150 WEST RANDO	LPH ST	County SAINT CHARLES	DMH Licensed	No
SAINT CHARLES	MO 63301-0894	Region 5 Medicare/Medicaid	Facility Number	06316
WINDSOR HEALTHCARE & REHA	AR CENTED			
809 WEST BENTON	E CENTER	<b>Telephone</b> (660) 647-3102	Alzheimer's Unit	No
WINDSOR	MO 65360-1239	Level of Care: SNF	Bed Capacity	60
Mailing Address PO BOX 5	WO 03300-123)	County HENRY	DMH Licensed	No
WINDSOR	MO 65360-0005	Region 1 Medicare/Medicaid	Facility Number	21715
WIT TO SOIC	1120 03300-0003	region i Medicare/Medicald	Facinty Number	21/13
WINFIELD RESIDENTIAL CARE				
220 WEST WALNUT ST		<b>Telephone</b> (636) 668-8110	Alzheimer's Unit	No
WINFIELD	MO 63389-1122	Level of Care: RCF	Bed Capacity	20
Mailing Address 220 WEST WALNUT		County LINCOLN	DMH Licensed	Yes
WINFIELD	MO 63389-1122	Region 5	Facility Number	08729

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WOOD OAKS, INC				
1804 SOUTH STERLING AVE		<b>Telephone</b> (816) 254-5400	Alzheimer's Unit	No
INDEPENDENCE	MO 64052-3845	Level of Care: RCF*	Bed Capacity	30
Mailing Address PO BOX 520049		County JACKSON	DMH Licensed	Yes
INDEPENDENCE	MO 64052-0049	Region 3	Facility Number	02389
WOODLAND MANOR				
1347 EAST VALLEY WATERMILL R	D	<b>Telephone</b> (417) 833-1220	Alzheimer's Unit	No
SPRINGFIELD	MO 65803-3739	Level of Care: SNF	<b>Bed Capacity</b>	94
Mailing Address 1347 EAST VALLEY	Y WATERMILL RD	County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65803-3739	Region 1 Medicare/Medicaid	Facility Number	05794
WOODLAND MANOR NURSING C	ENTER			
100 WOODLAND COURT		<b>Telephone</b> (636) 296-1400	Alzheimer's Unit	No
ARNOLD	MO 63010-2030	Level of Care: SNF	<b>Bed Capacity</b>	178
Mailing Address 1749 GILSINN LAN	E	County JEFFERSON	DMH Licensed	No
FENTON	MO 63026-2039	Region 2 Medicare/Medicaid	Facility Number	12549
WORTH COUNTY CONVALESCE	NT CENTER			
503 E 4TH ST		<b>Telephone</b> (660) 564-3304	Alzheimer's Unit	No
GRANT CITY	MO 64456-8363	Level of Care: SNF	<b>Bed Capacity</b>	50
Mailing Address 503 E 4TH ST		County WORTH	DMH Licensed	No
GRANT CITY	MO 64456-8363	Region 4 Medicare/Medicaid	<b>Facility Number</b>	08779

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